



A U S T R A L I A N
mensa
ABN: 58 020 031 207 I N C

Subscription Renewal

Mensa Australia
Suite 12, 8-12 Stafford St
Midland WA 6056
Fax : (08) 9274 5544

Name: _____ Member No : _____

Postal Address: _____

_____ State _____ PC _____

Phone (H) _____ (W) _____ (M) _____

Email address: _____

Include email Phone number in printed membership lists.

My preferred phone number is Home Work Mobile

Occupation: _____

OFFICE USE:

Database
Card
Email
redirection
CML
Concession Elig
Lapel Pin

FEES: Includes GST (enclose proof of concession, eg photocopy Centrelink or student card)

Full Rate per year \$88.00 (1 or 3 years available) \$ _____

Concession Rate \$44.00 (1 year ONLY) \$ _____

Concession type Pension Unemployed Student

Addition member at same address \$30.00 (Mem No: _____) \$ _____

Miscellaneous

Current Membership list \$5.50. \$ _____

Personalised email redirection (18 years and over) \$11 per year. \$ _____

(your name) _____@mensa.org.au

Donation to Mensa Gifted Children's fund (at your discretion). \$ _____

Donation to Australian Mensa Inc (at your discretion) \$ _____

Lapel Pin (Black and chrome Mensa logo) \$5.50. \$ _____

Certificate of membership (A4 suitable for framing) \$33. \$ _____

I enclose my cheque/money order made payable to Australian Mensa Inc.

I authorise payment by Credit Card as below, for the amount of \$ _____

I authorise Automatic annual payment by Credit Card as below, (Initial here _____)

VISA MasterCard

Name on Card: _____

Card Number: _____ Expiry Date: _____

Signature: _____

On line payments can be made at <http://mensa.org.au/memberpay> using credit card or PayPal