

KAG Membership Application Form

ABN 85 618 891 610

www.koalagroup.asn.au

email: admin@koalagroup.asn.au

Name:

Address:

.....P/Code:

Telephone:Email:

Please indicate if you are interested in any of the following activities.

Tree planting

Tree propagation

Displays

Letterbox drops

Wildlife ambulance

Donation (optional)

Annual Membership Rates. Please indicate desired membership type.

Single - \$15

Family - \$25

Concession (Single/Family) - \$10

I apply for membership of the Koala Action Group Qld Inc and enclose my membership fee.

Signature: Date:

Please send to:

**KAG
PO Box 660
Capalaba Qld 4157**