

Membership Form

Yes! I would love to join the RSPCA Paw Prints Club.

My name: _____

My address: _____

Postcode: _____

My email address: _____

Telephone number: _____

Date of Birth: / /

Parent/Guardian signature: _____

Please send the completed form together with a cheque or money order (made payable to the RSPCA) for \$20 to the RSPCA Paw Prints Club

3 Burwood Highway,
Burwood East 3151
Victoria

Fax: 9224 2507

Alternatively provide credit card details below:

Bankcard Mastercard Visa Card Amex Diners

_____ / _____ / _____

Name on card: _____

Signature: _____

Expiry Date: _____

Please tick if you would like to receive any of the following information:

Junior Fundraising for the RSPCA

RSPCA Education services for your school