



## MEMBERSHIP FORM

New Italy Museum Inc.

PO Box 5139

East Lismore NSW 2480

[membership@newitaly.org.au](mailto:membership@newitaly.org.au)

[www.newitaly.org.au/membership/](http://www.newitaly.org.au/membership/)

Dear Member,

On behalf of the New Italy Museum Inc., I would like to thank you for your membership.

There are two options:

1. 12 month membership \$20.00
2. Lifetime membership \$250.00

Please complete this form and return it to the Membership Officer at the above address

TITLE (Mr/Mrs/Ms/Other) .....

SURNAME .....

GIVEN NAME.....

ADDRESS.....

.....

STATE..... POSTCODE..... COUNTRY .....

TELEPHONE and/or MOBILE.....

EMAIL.....

☐ My Cheque for \$.... is attached.

☐ Go to website to complete the online form at <https://www.newitaly.org.au/membership/> and pay using:-

1. PayPal or
2. Direct Deposit

**BANK:** Westpac **Name:** New Italy Museum Inc **BSB:** 032 539 **ACCOUNT:** 691710  
**REFERENCE:** your full name

Please indicate your reason(s) for applying for membership:-

☐ I am a descendant of the settlers of New Italy from the family line(s):-

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☐ I wish to support the heritage and culture of New Italy.

Signature..... Date.....

Thank you for being a part of the New Italy Museum community.

Emails from us will be to distribute material that is key to our operations i.e. 'Il Giornale' newsletters, AGM material, extraordinary meetings or membership renewals.

We will never share your contact details with any other person/party.