



scleroderma nsw

Supporting the Scleroderma Community in NSW



The Scleroderma Association of NSW Inc.
PO Box 229, Epping NSW 1710 | 02 9798 7351
Email: sclerodermansw@tpg.com.au

Membership/Renewal Application

Please help us keep our records up-to-date by completing this form and returning it with your fees to the PO Box or email listed above

Title Mr Mrs Ms Dr Other

Surname _____ Other Names _____

Organisation/Company _____

Residential/Postal Address _____

State _____ Post Code _____

Telephone Home _____ Mobile _____

Email Address _____

Emergency Contact Details _____

Membership Fees

Please find enclosed my membership fee (\$30) for the year 20_____ \$ _____

Donation for research into Scleroderma \$10 \$25 Other \$_____ \$ _____

Donation towards running costs \$10 \$25 Other \$_____ \$ _____

TOTAL \$ _____

Method of payment

- Cheque (made payable to The Scleroderma Association of NSW Inc.)
- Money Order (made payable to Scleroderma Association of NSW Inc.)
- Direct Debit to: Scleroderma Association of NSW Inc.

ANZ Bank BSB: 012-215 A/C: 2435-20617

Date payment made _____

Credit Card VISA MASTERCARD

Card Number: _____

Expiry Date: _____ / _____ CVC _____

When paying by direct debit, please use your **SURNAME** as reference and return this application completed to enable cross checking & prompt processing.

Donations of \$2 or more are Tax Deductible. Membership Fees are NOT tax deductible

Do you wish to receive a copy of the Annual General Report? Printed Emailed

DEMOGRAPHIC INFORMATION

(All information supplied remains confidential and will assist the organisation in gaining general information about membership demographics for funding purposes)

Date of Birth: _____ / _____ / _____

Do you have Scleroderma? YES NO Date diagnosed: _____

If yes, what form of Scleroderma has been diagnosed?

Diffuse Systemic Limited/CREST Morphea
 Other _____ Don't know

If not, what relationship do you have with people who have Scleroderma? (tick all which apply)

Relative Friend Carer
 Medical/Specialist Support Other _____

How did you find out about Scleroderma Association of NSW Inc.?

Internet/Website Newspaper Television
 Radio GP or Specialist Awareness week
 Other _____

The support, administration, education and awareness campaigns and fundraising of Scleroderma Association of NSW Inc. are primarily organised on a voluntary basis by members.

Please indicate if you are able to volunteer and support the organisation in any of the following:

Assist in the office Fundraising Publicity
 Sponsorship Assist on stalls Newsletter
 Other _____

What ways can the Association be of assistance to you?

Support Groups Newsletter Other _____

What topics would be of interest to discuss at Support Group Meetings
or be included in the quarterly newsletter? _____