

UPDATE YOUR DETAILS OF RENEWAL FORM	
First Name:	Surname:
Postal address:	
Home phone:	Mobile:
e-mail: (print clearly)	
First Name (Family Member)	Surname
e-mail: (print clearly)	

Please return this form with your payment (if required) EFT, cheque and remittance advice for \$90 for the financial year to:

Membership Officer, PO Box 449, Cleveland, 4163 or mailto:membership@redlandyurara.com.au

Enquiries: Sharyn Talbot Mob 0438 060 221

REDLAND YURARA ART SOCIETY Inc. BOQ BSB: 124 025 A/C No: 1032 2738

EFT available at the Studio. Forms and payment may also be returned via the "mailbox" on the front table in the Studio in an envelope with your name. *(Do not post cash payments)