



Launceston Cataract Gorge Protection Association Inc.

handsofffourgorge@gmail.com

I hereby apply for membership of the Launceston Cataract Gorge Protection Association Inc.

Fill in your details below and email the completed form to handsofffourgorge@gmail.com

Our current annual membership fee is \$10.00, pay by direct deposit, account details below.

Name:

Address:

Phone:

Email:

Account name: **Launceston Cataract Gorge Protection Association**

BSB: **807009**

Account number: **30105004**

Reference: **Your Surname**