**Friends of NERAM Membership *New & Renewal* 2023** 

Dear Friends,

Your membership goes a long way in supporting the operational needs at NERAM as well as sponsoring exhibitions, and funding special events like the After Dark series, the shop refurbishment and artwork restoration. We invite you to renew your Friends of NERAM membership over the next month. Your new membership will be valid to 31 March 2024.

Thank you for your continued support and for being a Friend of NERAM.

Debra Kelliher
Chair, Friends of NERAM Inc

|  |  |  |
| --- | --- | --- |
| **RENEWING** | Membership No. (if known) | **NEW MEMBER** |
| Title/First name/Surname |  |
| Email |  |
| Phone/mobile |  |
| Street address |  |
| Town/State/Postcode |  |
| No. of children under 18 (in Family membership) |  |

|  |  |  |
| --- | --- | --- |
| **Membership Categories** | $ | Your choice |
| Individual | 60.00 |  |
| Family – 2 adults & children under 18 | 90.00 |  |
| Student/Pensioner single \* | 25.00 |  |
| Pensioner couple | 50.00 |  |
| Registered Volunteer | 25.00 |  |
| Art teacher (Member of VADEA) | 50.00 |  |
| \*Must be a fulltime student, pension card/healthcare card holder or reside interstate. |  |  |
| **Add a donation** |
| Your generosity helps NERAM in so many ways to provide the variety of programs, exhibitions and activities available.NERAM Ltd is endorsed as a Deductible Gift Recipient. Donations of $2.00 or more are tax deductible. A separate receipt will be issued for your donation and donations of $500 and above will be acknowledged on the NERAM Donor Board. If you wish to remain anonymous, please tick here. \_\_\_\_ |  |
| **Total** (Membership Category + Donation if making one) | $ |

|  |  |
| --- | --- |
| **Payment Options** | 1. By **direct deposit** to BSB 932-000 Account no. 100306260. Reference is your name and/or membership number.Scan and email this form with the date and amount of payment to fonmembership@gmail.com . We will send your receipt and membership card.2. At the **front desk** at NERAM. |

***Thank you for supporting New England Regional Art Museum.***

**Friends of NERAM Gift Membership** 

|  |  |
| --- | --- |
| **Gift Recipient** |  |
| Title/First name/Surname |  |
| Email |  |
| Phone/mobile |  |
| Street address |  |
| Town/State/Postcode |  |
| No. of children under 18 (in Family membership) |  |

|  |  |  |
| --- | --- | --- |
| **Membership Categories** | $ | Your choice |
| Individual | 60.00 |  |
| Family – 2 adults & children under 18 | 90.00 |  |
| Student/Pensioner single \* | 25.00 |  |
| Pensioner couple | 50.00 |  |
| Registered Volunteer | 25.00 |  |
| Art teacher (Member of VADEA) | 50.00 |  |
| \*Must be a fulltime student, pension card/healthcare card holder or reside interstate. |  |  |

|  |  |
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| **Gift Giver** | Already a Friend? Yes / No |
| Title/First name/Surname |  |
| Email |  |
| Phone/mobile |  |
| Street address |  |
| Town/State/Postcode |  |
| Total payment | $ |

|  |  |
| --- | --- |
| **Payment Options** | 1. By **direct deposit** to BSB 932-000 Account no. 100306260. Reference is your name and/or membership number.Scan and email this form with the date and amount of payment to fonmembership@gmail.com . We will send your receipt and membership card.2. At the **front desk** at NERAM. |

***Thank you for supporting New England Regional Art Museum.***