



The Orchid Society of New South Wales Inc

PO Box 5396 Chullora NSW 2190

Affiliated Society Application/Renewal Form

Annual Renewal Due Date – 1st July

Affiliated Society:

Contact Name: Only if changed from information on OSNSW Website or if changed, write new

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Contact Postal Address: Only if changed from information on OSNSW Website or if changed, write new

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Contact Email: Only if changed from information on OSNSW Website or if changed, write new

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Contact Phone: Only if changed from information on OSNSW Website or if changed, write new:

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Meeting location and Time:

Membership Rates: \$62.00

Cheques are to be made payable to:

The Orchid Society of New South Wales Inc.
PO Box 5396
CHULLORA NSW 2190

Direct Deposit:

Account Name: Orchid Society of NSW | BSB 032-080 | Acct No. 558587

Reference must be your society's name.