



Post & Ante Natal Depression
Support & Information (PANDSI)

PO Box 366 Curtin ACT 2605

Ph 6286 4082 Fax 6286 4083

Membership Application

Name: _____

Address: _____

Ph: _____ (h) _____ (w) _____ (m)

Email: _____ Tick if you would like to receive
newsletter by email

Birth dates (of member and/or children) to be included in our newsletter (optional):

Membership Fee for the year is \$10, this is negotiable in hardship.

I have enclosed \$_____ for membership/donation* (strike which does not apply)

New Membership Renewal (please tick one)

Please return to our Treasurer at the above PANDSI address.

Volunteer Program

Are you interested in becoming a volunteer? Yes
No
Please call with more info

* All donations over \$2 are tax deductible

Please see next page for our terms and conditions

Terms and Conditions

As a member of PANDSI you are entitled to use all of our facilities and services, and receive our quarterly newsletters free of charge. We encourage you to take advantage of any discounts and offers that we may be able to procure for our members. You are also welcome to attend our Committee's Annual General Meeting which is usually held on the first Thursday in September at the Pearce Community Centre at 7.30pm. Your membership, however, does not entitle you to make any representations on behalf of PANDSI in any form (written or spoken) without prior written authorisation from the Committee.

I agree to abide by the above Terms and Conditions

Signed: _____

Office Use Only: Date:
 Membership No:
 Receipt No:
 Entered into database: