



# heart strings Membership Form

I want to become a member

I want to renew my membership

## Your Details

First Name

Last Name



Address

Suburb

State

Postcode




Email

Phone



Name of the baby or child you are remembering

Special date of remembrance

(e.g Their birthday, their deathdate, or other special date)



Name of the baby or child you are remembering

Special date of remembrance

(e.g Their birthday, their deathdate, or other special date)



I am a bereaved:

- Parent
  Grandparent
  Aunty
  Uncle
  Sibling
  Family (Household)

## Your payment details

Membership is free for your first year and then \$45 per year ongoing

- Please charge my credit card:
  Mastercard
  Visa
  Amex

Card number





Cardholders name

Expiry date:

 / 

CCV:

Signature:

Or  I have enclosed a cheque/money order payable to Red Nose

## Thank you so much for being part of Heart Strings!

Please send me more information about:

- Events and activities near me  
 Becoming a volunteer  
 Making a donation

A receipt will be sent to you shortly. Please note that membership of Heart Strings is not eligible for a tax deduction. Red Nose respects your privacy.

Visit [www.rednose.org.au](http://www.rednose.org.au) to learn more. To change your communication preference, please call us on **1300 998 698**.

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