

Office Bearers:
President: Trevor Neumann
Secretary: Anita Chalmers
Treasurer: Richard Gysi
Public Officer: David Bunt

PATRON: Assoc Prof. Allan Sturgess, PhD FRACP FRCPA

MEMBERSHIP FORM

NAME: _____

ADDRESS: _____

_____ **POSTCODE** _____

PHONE No **AREA CODE** _____ **NUMBER** _____

EMAIL ADDRESS: _____

(Please print your email address carefully)

Date of Birth _____

What form of Myositis do you have? _____

When were you first aware that something was wrong? _____

When was your form of Myositis first diagnosed? _____

Where do you hear about our Association _____

MEMBERSHIP INFORMATION (PLEASE TICK ✓)

- NEW MEMBER** (Person diagnosed with Myositis OR Parent of child with JM)
- ASSOCIATE MEMBER** (Other family member, relative, carer, etc)
- RENEWAL** – Member OR Associate Member (Please circle)
- \$10.00** – For **ALL** Memberships of The Myositis Association – Australia Incorporated (TMAA)
- DONATION:** If you would like to include a donation to our Association
- RECEIPT** – Do you require a receipt for membership or donation (Please circle)

Please post a cheque or Money Order payable to the Myositis Association Australia Inc. to our Treasurer **OR**
PAYMENT DIRECT TO OUR BANK ACCOUNT AT ST. GEORGE BANK.

If you would like to pay direct to our St George Account the details are: BSB 112-879 Acc 428543268. Please indicate the amount you have sent \$..... and Date **And your name** PLEASE NOTE: Do not send Credit Card details – we are unable to process any Credit Card payments. **TMAA membership (\$10.00) covers our Newsletter and information on what is happening in Australia. Please return this form and payment to our TREASURER **Mr Richard Gysi, Treasurer, 18 Coora Avenue BELROSE. NSW 2085. Email richardgysi@optusnet.com.au to enable you to continue to receive the newsletter and other information relating to Myositis:-****