

2026 MEMBERSHIP RENEWAL FORM

(Please circle one)

INDIVIDUAL (\$35) FAMILY (2 Adults \$50) SENIOR (\$20) STUDENT (\$20)

Title			Name/s			Surname		
Address					Postcode			
Telephone								
Email (Print clearly)								

Preferred correspondence *(Please circle one)* **EMAIL** or **POST**

Payment – Enclosed is *(Please circle one)*

DIRECT PAYMENT of \$_____ **for 2026 Membership**

Electronic transfer – Please indicate “membership” when transferring to this account

Dante Alighieri Society Melbourne Inc. Bendigo Bank (Cassa Commerciale)
BSB – 633 000 ACCOUNT NUMBER – 108 127 986

*(Please send a copy of your EFT receipt payment together with your form to Dante Alighieri
Society P.O. Box 1124, Carlton VIC 3053)*

Signature _____ **Date** _____

OFFICE USE ONLY DATE REC. 20/03/2025
Membership card/s issued

CHEQUE / CASH / MONEY ORDER / DIR. PAYMENT
Receipt no: