



BDSRA Membership Renewal Form 2011/2012



Contact Name

Address

.....
.....

Phone numbers (home)

(mobile)

Email

Would you like to receive updates/newsletters via our E-list? Yes / No

I would like more information on becoming a volunteer:

Membership fee 2011/2012 \$25.....

I would like to make a donation to the following area/s:

Research support into juvenile form:

Research support into late-infantile form:

Research support into infantile form:

General research support on any form:

Family programs to support areas such as;
Publications library, information & referral,
bereavement program, newsletter & website
and newly diagnosed families:

Total amount enclosed: ...\$.....

Please forward my receipt to the following address (*if different from above*):

.....

Please forward this form with your payment of \$25 payable by cheque or money order
(no cash please) to:

***BDSRA- Membership Renewal
P O Box 239
Rosedale VIC 3847***