



tarremah **steiner school**

**TARREMAH STEINER SCHOOL
FOUNDATION ANNUAL SUBSCRIPTION**

Surname _____

First Name _____

Address _____

_____ Post Code _____

Telephone No _____

Email Address _____

Please tick relevant box

- \$10 being for full subscription of my annual membership to the Tarremah Steiner School Foundation for the financial year January – December 2016.
- Concession amount is \$5 (for students, pensioners and unemployed).
- Please tick if the address given above is different to last year.
(We will amend our records)
- Please tick if Cheque enclosed.
(Cheques to be made payable to Tarremah Steiner School Foundation. Payments may also be made by phone or at the School Office.)

<input type="checkbox"/> Membership list updated	Office Use Only	Date _____	Initials _____
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