



St John

first to care

➤ St John Supporter Scheme Membership Form

(please download and print)

Principal Supporter details

(Please note that all correspondence will be addressed to the Principal Supporter)

Mr Mrs Miss Ms/other (please circle one) First names

Surname Date of birth

Street address Suburb

City Post code

Phone Email

Yes, we/I would like to join the St John Supporter Scheme:

As a household for \$46 per annum (members of a household must live at the same address and their names and details must be provided below) **OR** Would you like to add a donation?
 Donations of \$5 or more are tax-deductible and a receipt will be sent with your St John membership confirmation.

As an individual for \$31 per annum

Yes – I would also like to give a donation to support St John deliver and extend its services in the community:
\$15 \$30 \$50 \$100 \$ _____ (other)

Payment by

Enclosed cheque (payable to: Order of St John) **OR**

Charge my credit card (please tick one)

Card number Expiry date

Visa Mastercard American Express

Card holder's name

Total amount _____

Signature

St John Supporters – Household membership

Please provide the details of all members to be included. Remember that anyone listed must live at the same address as the Principal Supporter to be eligible.

Title First names Surname Date of birth

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Please mail to the most appropriate processing address:

If you live in the North Island:

St John Supporter Scheme, Private Bag 14902, Panmure, Auckland 1741

OR if you live in the South Island to your closest centre below:

St John Supporter Scheme, PO Box 1443, Christchurch Mail Centre, Christchurch 8140 **OR**
 St John Supporter Scheme, PO Box 5055, Moray Place, Dunedin 9058