

Updating Existing Member Details Form

Name *
First Name Last Name
Email *
example@example.com
Phone *
Address *
D.O.B *
Our members are so important to us, and we would love to be able to reach out to you when it is you special day
and wish you Happy Birthday Day / Month / Year
Next Of Kin *
Full Name Contact Number
Which statement best describes you? *
I have MS
My family member has MS

This form is for the Central Coast MS Branch only. This is so we can create a record of new members and update member existing member records. Member records may only be accessed by current active executive committee members of the branch. MS Plus may ask to view member records at any time as per our contract agreement with them.



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How do you wish to receive Central Coast Branch newsletters?
To keep costs down, we do prefer to send via email option, however if this is not optional for you than we are more than happy to mail out.
Mail Mail
Email
\$5 MEMBERSHIP FEE'S ARE PAYABLE EVERY 1 ST OF JUNE
You can pay your renewal fees in person every year at the Annual General Meeting, or via direct deposit with the banking details below;
NAME: Central Coast Branch of the Multiple Sclerosis Society of NSW BSB: 062-544 ACCT: 1005-4255 Reference: Your name
I understand, and agree to pay\$5 membership fee annually *
Yes
□ No
Thank you for reaching out. We welcome you to participate as much, or as little as you like. We're all

in this together. For any assistance, questions or just to talk, please don't hesitate to contact us on;

ccmsb.president@gmail.com or ccmsb.secretary@gmail.com

All General & AGM Meeting dates will be advised on our Facebook page

https://www.facebook.com/MsCentralCoastBranch

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