



The Brisbane Orchid Society Inc.

 bos.org.au

 brisbane.orchid.society@gmail.com



Current Member Details Update

Please complete the details below and return this form to The Brisbane Orchid Society secretary.

Membership Number: _____ Date: ___ / ___ / ___

Surname Name: _____ Given Name: _____ Preferred Name: _____

Email: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Postal Address (If Different): _____

Phone: (_____) _____ Mobile: _____

Do you wish to receive the newsletter via email? Yes No

Office Use Only

Class: O I N J

Secretary Initial: _____