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Telephone: _____

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Skills / Interests: _____

Annual Membership Subscription (in Australian Dollars)

Individual Friend \$30.00
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I authorise the membership fee to be automatically deducted from my credit card annually.
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Post to:
Foundation Director
St Andrew's Hospital Foundation Inc.
GPO Box 1299
Adelaide SA 5001

Phone: 08 8408 2005
Fax: 08 8408 2015
Email: gcespi@stand.org.au

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