



**Stillbirth And Neonatal Death Support (Qld) Inc.**  
including miscarriage support

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**MEMBERSHIP APPLICATION / RENEWAL FORM**

*Mutual support, information, education and advocacy for parents and families who experience the death of their baby through miscarriage, stillbirth, neonatal death, interruption of pregnancy for abnormality and other reproductive losses.*

**NEW MEMBER**       **MEMBERSHIP RENEWAL**       **CHANGE OF ADDRESS**

**Annual membership is \$30 (inc GST), however in case of hardship a donation is accepted.**

I wish to apply for:       **Ordinary Membership:** Bereaved parents and their families  
 **Associate Membership:** Professionals and community individuals/groups

**PERSONAL DETAILS**

**FIRST NAME** Mr / Mrs / Ms / Dr..... **LAST NAME**.....

**PARTNERS NAME** Mr / Mrs / Ms / Dr..... **LAST NAME**.....

**HOME ADDRESS** ..... **PCODE** .....

**POSTAL ADDRESS** ..... **PCODE** .....

**HOME** ..... **WORK** ..... **MOBILE** .....

**EMAIL** .....

Your loss:       MISCARRIAGE       STILLBIRTH       NEONATAL DEATH  
 INTERRUPTION OF PREGNANCY (Abnormality)       OTHER .....

Your baby/s name (optional) .....

Your baby/s birth date (optional) .....

I WISH TO RECEIVE MY NEWSLETTER VIA:       EMAIL       POST

***I agree to abide by the Constitution of SANDS (Qld) Inc. (A copy of the Constitution is available from SANDS (Qld) Inc.)***  
***\*\*I note that Sands has Public Risk Liability Insurance in an amount of \$10,000.000 per occurrence.***

Signature ..... Date .....

**DONATIONS**

I/We would like to make a donation to SANDS (Qld) Inc of \$ .....  
If donation is made in a baby/s memory please supply their name/s .....

I/We would like to donate the following goods / services to SANDS (Qld) Inc.....

Receipt for donations required? YES / NO

**PAYMENT**

Total amount Payable \$ .....

Cheque / Money Order enclosed (*payable to SANDS (Qld) Inc.*)

Please charge my MASTERCARD / VISA / BANKCARD

Card Number ..... Exp Date .....

Name ..... Signature .....

**VOLUNTEER REGISTRY**

SANDS (Qld) Inc relies on the assistance of volunteers to continue offering support and services to bereaved parents, their families and carers. Please let us know if you are able to help in a specific area. ***We really appreciate any help you can give.***

LISTENER       NEWSLETTER       FUNDRAISING  
 SUPPORT MEETINGS       PUBLIC RELATIONS       OTHER .....

**MEMBER SURVEY**

Please indicate the SANDS (Qld) Inc. services you have used in the last 12 months

Which services you have found most helpful?

Are there any other services that you would like available?

Other comments