

Become an ATSS Supporter

By becoming an ATSS Supporter you will become a member of ATSS and have the option to receive Reach Out by email or by post. Most importantly you will be helping ATSS continue its work of supporting families affected by Tuberous Sclerosis Complex and raising awareness of TSC in the community and amongst medical professionals.



Australasian
Tuberous Sclerosis
 Society

Please complete this form and return with your payment to:
ATSS Inc.
 c/- 74 Tallawong Avenue, Blacktown NSW 2148

Name:	Mr/Mrs/Ms/Dr
Address:	
Phone:	H) _____ W) _____ M) _____
Email:	

How would you like to receive ReachOut, ATSS's biannual journal? Email Post

Classification: TSC Family Medical Professional Other _____

Optional (please circle all that apply)

Are you affected by TSC? YES / NO If No, Name of TSC affected person: _____

Date of Birth: _____ Male / Female

Your relationship to TSC affected person: Parent / Grandparent / Sibling / Carer / Other _____

How did you first hear about ATSS? Internet / Doctor / ReachOut / Friend / Brochure / Other _____

- I would like to become a
- BRONZE Supporter \$ 25
 - SILVER Supporter \$ 50
 - GOLD Supporter \$ 100

I would like to make an additional donation to ATSS \$_____

TOTAL \$_____

Please note \$5 from each Supporter fee will be a membership fee and the remaining will be a tax deductible donation. Payments can be made by Cheque or Credit Card.

Please debit my VISA or Master Card for the amount of \$_____

Name on Card: _____ Card #: _____

Signature: _____ Expiry Date: __ / __ CSV: ___ (Last 3 digits on back of card)

Declaration:

I/We apply to become a Member/Members of the Australasian Tuberous Sclerosis Society Inc. I/We agree to be bound by the rules of the Society at all times.

 Signature of Applicant

Date: ____ / ____ / ____