



Newsletter Subscription Form

Purpose:

To receive MI Care updates, event notices, program information, and community news directly to your email inbox.

1. Your Details

Full Name:

Email Address:

Phone (optional):

Connection to MI Care:

- Member
- Volunteer
- Committee
- Facilitator
- Community Supporter
- Visitor

Other: _____

2. Communication Preferences

Please select the updates you would like to receive:

- Monthly Newsletter
- Program & Activity Updates (e.g., Social Club, Art, Zumba, Storytelling)
- Special Announcements (events, fundraisers, community notices)
- Volunteer Opportunities
- All MI Care Communications

3. Consent

By subscribing, you agree to receive email updates from MI Care. You may unsubscribe at any time by contacting us at admin@micare.org.au or using the unsubscribe link (where available).

Signature: _____

Date: _____

4. Office Use Only

Entered by: _____

Date entered: _____

- Added to mailing list
- Confirmation email sent