

# MEMBERSHIP APPLICATION

**First & Last Name:** (Designate Relationship; eg Self, Husband, Daughter, etc) Home Phone:.....

(Mr/Mrs/Ms) ..... Mobile:.....

Email:.....

(Mr/Ms) ..... Mobile:.....

Email:.....

(Mr/Ms) ..... Age – if under 18:..... Mobile:.....

(Mr/Ms) ..... Age – if under 18:..... Mobile:.....

(Mr/Ms) ..... Age – if under 18:..... Mobile:.....

(Mr/Ms) ..... Age – if under 18:..... Mobile:.....

**Address:**..... **Post Code:**.....

**Type of Membership** (Please Tick)

- Single \$25  
  Double \$45  
  Conc Single \$20  
  Conc Double \$30  
  Student \$20  
  Family \$50 (Children under 18 only)

Payment can be made by cheque to **The Membership Secretary, Noosa Arts Theatre, PO Box 3, Noosa Heads 4567**

OR credit card: Credit Card no: ..... Expiry Date: ..... CCV: .....

Payment can be also be made online, just visit our “Get Involved” page at [www.noosaartstheatre.org.au](http://www.noosaartstheatre.org.au)

Please mark the following with either E=Experienced or I=Interested	Acting	Musicals	Dancing	Music	Directing	Stage Management	Set Construction	Wardrobe	Sound	Lighting	Make-up	Hairdressing	Front of House	Bar	Backstage	Box Office	Publicity
Name																	

Current/Former Occupation (maybe helpful to theatre):.....

**Membership at Noosa Arts Theatre entitles you to:** Discount on seat prices - Regular Newsletters - Insurance cover while involved in Noosa Arts Theatre events

*I/We hereby agree to abide by the Conditions and Rules of Noosa Arts Theatre Inc.*

Signature: ..... Date: .....

Theatre use only:  Fee received     SABO entry     Mailchimp entry