

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

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

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