



P O Box 591 Maryborough Qld 4650

APPLICATION/RENEWAL FOR MEMBERSHIP 2019 - 2020

SURNAME GIVEN NAMES

ADDRESS

DATE OF BIRTH

TELEPHONE NUMBER MOBILE NUMBER.....

EMAIL

OCCUPATION

CURRENT HOLDER OF POSITIVE NOTICE BLUE CARD: REGISTRATION NUMBER EXPIRY DATE
(Issued by Commission for Children and Young People and Child Guardian)

PERSON TO BE NOTIFIED (In case of illness or accident)

Name..... Telephone Number

I hereby apply for Membership/Renewal with the Maryborough Players Inc. and agree to abide by the Constitution and Rules.

Signature of Applicant Date / /

Signature of Parent/Guardian Date / /
(Required for applicant under the age of 18)

Theatre - My main areas of interest are (Please tick)

Acting Directing Stage Management Promotion & Media
Sets & Props Backstage Administration Other

FEES for Membership - \$20.00

(Valid for Financial year 1 April 2019 – 31 March 2020) **Maryborough**

Players Inc is covered Public Liability Insurance.

To become a subscriber or to renew your subscription please complete and sign the form and mail to us, along with the full amount. Cheques to be made payable to Maryborough Players Inc. and mailed to P O Box 591, Maryborough Qld 4650.

Office use only -

Passed by Committee Signature of President

Membership Fee paid \$ Receipt Number Date / /

Privacy Notice:

In using this form you are providing personal information such as name and contact details to Maryborough Players Inc. This information will be used only for the purpose stated above and will only be accessed by persons who have been authorised to do so.

As a financial member of Maryborough Players Inc you also accept and understand that photographs may be taken during the course of your participation and may appear on televised, print and social media networks for promotional purposes, unless advised by you in writing not to do so.

Your personal information is handled in accordance with the Constitution and Rules of Maryborough Players Inc.