



APPLICATION FOR MEMBERSHIP OF GOULBURN LIEDERTAFEL

I, (name of current member)

nominate (full name of applicant).....

of (address).....

to become a member of the above-named incorporated association.

.....Signed by the member Date

In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

.....Signature of Applicant Date:.....

Telephone number E-mail address

APPLICATION FOR MEMBERSHIP RENEWAL

I am already a member of Goulburn Liedertafel, and wish to renew my subscription.

Name:

Address:

Phone: E-mail address

Date: Signature:

ANNUAL SUBSCRIPTION RATES (inclusive of GST)

**Single membership \$15.00 (plus \$5.00 joining fee if new member)

**Family membership \$20.00 (plus \$5.00 joining fee if new members)

Amount payable: \$.....

Survey

Please take the time to register your interests so that we can keep in touch with member's needs

<input type="checkbox"/>	Acting	<input type="checkbox"/>	Set design	<input type="checkbox"/>	Prompt
<input type="checkbox"/>	Costume design/ making	<input type="checkbox"/>	Sound design,	<input type="checkbox"/>	Props/ set dressing
<input type="checkbox"/>	Play reading	<input type="checkbox"/>	Stage management	<input type="checkbox"/>	Front of house
<input type="checkbox"/>	Hair/make-up	<input type="checkbox"/>	Sound operation	<input type="checkbox"/>	Box office
<input type="checkbox"/>	Lighting design	<input type="checkbox"/>	Lighting operation	<input type="checkbox"/>	Membership
<input type="checkbox"/>	Acting classes	<input type="checkbox"/>	Set construction	<input type="checkbox"/>	Publicity/ promotions

I would like to receive correspondence and the Lieder Newsletter via email Hard copy by post

Do you have a current First Aid Certificate? Yes/No or an OH&S Certificate? Yes/No