

APPLICATION FOR MEMBERSHIP

Parkes Musical and Dramatic Society Inc.
(incorporated under the Association Incorporation Act, 2009)

Date _____

I, _____
(full name of applicant)

of _____
(address)

Phone: _____(HM) _____(MOBILE)

E-Mail _____

Hereby apply to become a member of the above named incorporated association. 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

Type of Membership requested Junior \$10.00 Adult \$20.00 Family \$40.00

(Juniors are members aged 19 years and under as at 1st January that year)

Names of other family members *(for family memberships)*

All members over the age of 18 years must provide a current Working with Children (WWC) Check certificate and their date of birth to the registrar. This will be requested via email by the registrar after membership is approved at a Society meeting.

To apply for a WWC Check, go to: <https://wwccheck.cyp.nsw.gov.au/Applicants/Application> and fill out an application. You will be issued a number to take to the Roads & Maritime Services to present along with your licence or photo I.D. A WWC certificate will then be emailed to you, and this should be forwarded on to the Registrar for registration & verification.

Please return this form and membership fee to the registrar or post to PO Box 376 Parkes NSW 2870

MEDIA PERMISSION FORM

I, _____ (applicant guardian of applicant) hereby give permission for photographs and/or video to be taken for publication/promotional purposes during rehearsal and performances of any show produced by Parkes Musical and Dramatic Society.

Signature of applicant

Parent signature (if under 18 years)