## **APPLICATION FOR MEMBERSHIP**

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

Date	<u></u>
1	
1,	(full name of applicant)
of	
	(address)
Phone:	
Email	
read and understand the Society (	er of the above named incorporated association. I have Code of Conduct and agree to abide by the standards and cument for the duration of my membership.
	Signature of applicant
Type of Membership requested	☐ Junior \$10.00 ☐ Adult \$25.00 ☐ Family \$50.00
(Juniors are members aged 19 ye	ars and under as at 1 <sup>st</sup> January that year)
Names of other family members (#	for family memberships)
the age of 18 years may be asked certificate and their date of birth to checks will be required for anyone legislated exemptions apply. A me	ng Persons (Care and Protection) Act 1998, members over It to provide a current Working with Children (WWC) check of the registrar as a condition of their membership. WWC working with children under the age of 18 unless ember of the executive will inform you if you are required to membership, or when taking on specific roles in the
	pership fee to PO Box 376 Parkes NSW 2870. If making lik details are: BSB: 032 834 Account no. 221279
	DIA PERMISSION FORM
1	(Papplicant Equardian of applicant) haraby give
	(□applicant □guardian of applicant) hereby give or video to be taken for publication/promotional purposes es of any show produced by Parkes Musical and Dramatic
Signature of applicant	Parent signature (if under 18 years)