

P O Box 591 Maryborough Qld 4650 APPLICATION/RENEWAL FOR MEMBERSHIP 2021 - 2022

SURNAME	GIVEN NAMES	
ADDRESS		
DATE OF BIRTH		
TELEPHONE NUMBER	MOBILE NUMBER	
EMAIL		
OCCUPATION		
	POSITIVE NOTICE BLUE CARD: REGISTRATION NUMBER	EXPIRY DATE
PERSON TO BE NOTIFIE	D (In case of illness or accident)	
Name		
I hereby apply for Members Rules.	ship/Renewal with the Maryborough Players Inc. and agree	e to abide by the Constitution and
Signature of Applicant .		Date / /
Signature of Parent/Guar (Required for applicant u	diannder the age of 18)	Date / /
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 2021–31 March 2022) Maryborough Players Inc is covered Public Liability Insurance.		
	or to renew your subscription please complete and sign seques to be made payable to Maryborough Players Ind	
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.