



# CAMPBELLTOWN THEATRE GROUP INCORPORATED APPLICATION FOR MEMBERSHIP

Please complete the following details:

Name: \_\_\_\_\_

Street/Postal Address: \_\_\_\_\_  
\_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please note: if you are under 13 years of age at the time of joining, one of your parents or legal guardians **must** also apply for adult membership.

I/We would like to apply for (please tick):

Adult membership: \_\_\_\_\_ \$ (incl GST) \*for ages 18 and above

Youth membership: \_\_\_\_\_ \$ (incl GST) \*up to 18 years of age

Family membership: \_\_\_\_\_ Rate on application

\_\_\_\_\_ PLEASE TICK HERE IF YOU DO NOT WISH FOR YOUR PHOTO  
AND/OR DETAILS TO APPEAR ON ANY CTG INC PUBLICITY

(including advertising, programs, literature, website or any other form of promotion)

I hereby apply to become a member of the Campbelltown Theatre Group Incorporated (CTG Inc). By signing this form, and upon my acceptance as a member, I agree to be bound by the constitution and rules of CTG Inc as they apply for the duration of my membership, including **prompt** payment of any fees owing.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### General Information – please note for your records

Membership renewals fall due on January 1 each year. Membership will cease if a renewal is not made by February 28 (29 in a leap year).

**Adult** membership entitles you to appear on stage in CTG productions; hold office on the Executive or other committees; vote at general meetings; receive a copy of the CTG newsletter *Encore*; be rostered for theatre duties; and attend functions and meetings of CTG.

**Youth** membership retains similar entitlements but voting rights and eligibility to hold office are restricted.

### Contacts:

Theatre phone – ~~4628 0504~~

Booking number - 4628 5287

Written queries – The Secretary, CTG Inc, PO Box 162, CAMPBELLTOWN 2560