



School Holiday Production
Membership Form
July 2024

PERSONAL DETAILS

Name				
Address				
City		Postcode		
Date Of Birth		Pronouns		
Contact Number		Year at School		
Email				
Preferred Contact	<input type="radio"/> Facebook	<input type="radio"/> Email	<input type="radio"/> SMS	<input type="radio"/> Phone Direct

PARENT/GUARDIAN DETAILS

Name				
Address (if different to above)				
City		Postcode		
Contact Number		Relationship to Child		
Email				
Preferred Contact	<input type="radio"/> Facebook	<input type="radio"/> Email	<input type="radio"/> SMS	<input type="radio"/> Phone Direct
Emergency Contact Name		Emergency Contact Phone		

THEATRE INTEREST

<input type="checkbox"/>	Acting	<input type="checkbox"/>	Set Construction/Design	<input type="checkbox"/>	Singing	<input type="checkbox"/>	Makeup/Hair
<input type="checkbox"/>	Backstage	<input type="checkbox"/>	Lighting Design/Operation	<input type="checkbox"/>	Dancing	<input type="checkbox"/>	Costume/Wardrobe

At NSTI, we encourage all members to participate in all facets of Theatrical Performance.
Please indicate where your interests lie.

MEDICAL DETAILS

Medical Conditions/Allergies			
Ambulance Subscription	YES / NO	Health Insurance	YES / NO

Should an ambulance be necessary for my child, I acknowledge my financial responsibility for any related expenses.

MEDIA RELEASE

I permit Numurkah Singers Theatre Inc. (NSTI) to use and print my photographs or any other media for promotional, educational, and informational purposes. These images may be used in NSTI publications, including production programs, newsletters, newspaper articles, advertising materials, and on NSTI's Facebook, Instagram, and web pages.	YES / NO
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COSTS

The cost of the program (including membership) is \$100.

If a yearly membership has already been paid, it will be deducted from the cost.

MEMBERSHIP AGREEMENT AND ACKNOWLEDGEMENT

- ☐ I acknowledge and consent to my data being collected, and my details being used for NSTI communications.
- ☐ I acknowledge and consent to my details being given to authorised agencies as directed by the government.
- ☐ I acknowledge receiving, reading, and understanding my obligations under the NSTI Code of Conduct.
- ☐ I agree to adhere to the programs expectations as stated in the show information document.

	Signature	Date
Applicant		___/___/___

	Signature	Date
Parent/Guardian		___/___/___

Numurkah Singers Theatre Incorporated 52 Quinn Street, Numurkah, 3636 Mailing Address - PO Box 5, Numurkah, 3636 Email: numurkhsingersinc@gmail.com	Payment Details Bank: Bendigo Bank Account Name: Numurkah Singers Theatre Inc. BSB: 633000 Account No: 142196831 Use your name as the Payment Reference Example John Smith reference would be JSmith
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Office Use Only

<input type="checkbox"/> Payment Received	<input type="checkbox"/> Payment Date ___/___/___	
<input type="checkbox"/> Approved by Committee	<input type="checkbox"/> Date Accepted ___/___/___	<input type="checkbox"/> Details Scanned and saved