

**PERSONAL DETAILS**

<b>Name</b>			
<b>Address</b>			
<b>City</b>		<b>Post Code</b>	
<b>Date of Birth</b>		<b>Pronouns</b>	
<b>Contact Number</b>		<b>Occupation</b>	
<b>Email</b>			
<b>Emergency Contact</b>			
<b>Contact Number</b>		<b>Relationship to Member</b>	

**FAMILY MEMBERSHIP**

Please complete a separate form for each Family Member 18 years and older

<b>Name</b>	<b>Date of Birth</b>	<b>Contact Number</b>

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

<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

## MEDICAL DETAILS

<b>Medical Conditions/Allergies Disabilities/Special Needs</b>			
<b>Ambulance Subscription</b>	YES / NO	<b>Health Insurance</b>	YES / NO

☐ I acknowledge that, in the event an ambulance is required for myself, I accept financial responsibility for any expenses incurred.

## WORKING WITH CHILDREN CHECK (All Members over 18, must have a WWCC)

<b>Working with Children Check</b>		<b>Vic Teaching of Institute</b>		<b>Police</b>
<b>Card Number</b>			<b>Expiry Date</b>	

## 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 Social Media and Web pages.

YES / NO

## MEMBERSHIP TYPE (Please tick relevant box/s)

<input type="checkbox"/> Family \$70.00	<input type="checkbox"/> Adult \$45.00	<input type="checkbox"/> Concession \$25.00	
<input type="checkbox"/> New Member		<input type="checkbox"/> Renewing Member	

## PRIVACY & SECURITY STATEMENT

- ☐ I acknowledge and consent to the collection of my data and its use for official communications from NSTI.
- ☐ I acknowledge and consent to the disclosure of my personal details to authorised agencies as directed or required by government regulation.
- ☐ I acknowledge that I must have or be in the process of obtaining a Working With Children Check or equivalent.
- ☐ I acknowledge that I am obliged to disclose any criminal convictions that may affect my capacity to participate in NSTI activities.
- ☐ I understand that my failure to disclose criminal convictions may result in the rejection of my membership application or disciplinary action against me under the Rules and Regulations.
- ☐ I acknowledge receiving, reading, and understanding my obligations under the NSTI Code of Conduct.

## Signature and Date

	____/____/____
--	----------------

<b>Payment Details</b> <b>Bank:</b> Bendigo Bank <b>Account Name:</b> Numurkah Singers Theatre Inc. <b>BSB:</b> 633 000 <b>Account No:</b> 142 196 831 Use Name as the Payment Reference	<b>Numurkah Singers Theatre Incorporated</b>  52 Quinn Street, Numurkah Postal Address PO Box 5, Numurkah, 3636 <b>Email:</b> numurkhasingersinc@gmail.com
---	---

## 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