

## MEMBERSHIP APPLICATION FORM

Name .....

Postal Address .....

Suburb.....Post Code.....

Email.....

Phone (day)..... Phone (a/h) .....

I enclose the sum of ..... [  ] \$65 (Group Membership\*)  
*(tick one)* ..... [  ] \$20 (Subscription m/ship\*)

*\*Memberships and subscriptions are due at our AGM in February each year.*

This is a ..... [  ] renewal..... [  ] new application  
*(tick one)* ..... [  ] gift from \_\_\_\_\_

Signed ..... Date ...../...../2008

*Electronic payment can be made to the Theatres Association of SA with the following Bpay details. **BSB** 105 124 - **ACCOUNT No.** 457326840*

*All payments made electronically must be confirmed via email. Please email a copy of your BPAY and payment details to [tasa@picknowl.com.au](mailto:tasa@picknowl.com.au)*

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