

## MEMBERSHIP APPLICATION FORM

Name

Postal Address

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

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Phone (bus)      Phone (a/h)

I enclose [  ] \$65 (Group Membership) [  ] \$20 (Individual Subscription)  
(tick one) \*Memberships and subscriptions are due at our AGM in February each year.

This is a .....[  ] renewal.....[  ] new application

Signed Date ...../...../2009

Payments can also be made by electronically transferring funds from your financial institution to the following Theatre Association of SA bank account: **BSB** 105 124 **ACCOUNT No.** 457326840. Please immediately advise TASA when you make electronic payments, by emailing the details of your payment to [tasatreasurer@optusnet.com.au](mailto:tasatreasurer@optusnet.com.au)

A receipt will not be issued unless specifically requested, and a stamped self addressed envelope is provided.



### **POST TO:**

The Theatre Association of SA. INC  
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### **TASA CONTACT DETAILS:**

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