



**Highlands Theatre Group Inc.**

PO Box 220, Bowral NSW 2576

admin@htg.org.au

### ASSOCIATE MEMBERSHIP APPLICATION

Anyone may become an Associate Member for a year on payment of **\$20** (Concession \$15).

Associate Membership is for a Calendar Year (1 January to 31 December) regardless of joining date.

An Associate Member is entitled to be cast in the Group's Productions during the membership year, to receive newsletters, and any other benefits decided by the Committee.

Full Members, but not Associate Members, are entitled to vote or stand for election to the committee.

Only individuals may become Associate Members, not organisations or families.

Name: _____
Postal Address: _____ _____
Phone Home: _____
Mobile: _____
Work: _____
Email: _____

The Highlands Theatre Group relies on the dedication and skills of its members to produce quality shows. Please indicate roles for which you would be willing to volunteer, with a tick ...

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Principal roles | <input type="checkbox"/> Set Design             | <input type="checkbox"/> Artwork, publications |
| <input type="checkbox"/> Ensemble roles  | <input type="checkbox"/> Set Construction       | <input type="checkbox"/> Marketing             |
| <input type="checkbox"/> Music           | <input type="checkbox"/> Lighting, Sound        | <input type="checkbox"/> Publicity             |
| <input type="checkbox"/> Backstage Crew  | <input type="checkbox"/> Makeup                 | <input type="checkbox"/> Web site maintenance  |
| <input type="checkbox"/> Front-of-house  | <input type="checkbox"/> Hairdressing           | <input type="checkbox"/> Social Organisation   |
| <input type="checkbox"/> Costume Design  | <input type="checkbox"/> Director/Asst Director | <input type="checkbox"/> Administration        |
| <input type="checkbox"/> Costume Sewing  | <input type="checkbox"/> Production Management  | <input type="checkbox"/> Sponsor Relations     |

Other Areas of interest or skill: \_\_\_\_\_

Enclosed is my Membership Fee of \$ _____ for the calendar year _____
Signature _____ Date ___/___/_____
Post this completed application and payment to:
Secretary Highlands Theatre Group Po Box 220, Bowral NSW 2576
Alternatively, send an email to secretary@htg.org.au, and transfer payment to HTG, BSB 802-101 Account 353314, with reference "membership" and your name.

Receipt No _____	Date Mem Sec _____	Csh/Chq/MO _____	\$ _____
Mem DB _____	Email List _____	Volunteer DB _____	