

Application for Membership

I, Mr/Mrs/Ms/Miss..... (full name of applicant)

of

(address).....Postcode.....

PhoneEmail

apply for membership of the Berwick Artists Society, Incorporated. In the event of my admission as a member, I agree to be bound by the rules of the Society for the duration of my membership.

Couple membership: Please list the names of spouse or partner covered by this application. Couple member must live at the same address as the main applicant.

Name.....

Please provide contact details to be used only in the event of emergency (mandatory)

Name.....Relationship.....

Contact Numbers

1.....2.....

Please describe briefly, your art interest, your passion for painting and activities.

[Empty rectangular box for describing art interest]

Please indicate whether paying by cheque, money order or cash.

PTO

✂ Internal use: treasurer's copy, new membership

Received fromthe sum offor the period ending 30th June 2.....by cheque, money order or cash (delete as applicable)

SignedPositionDate.....

✂ Internal use: applicant's copy new membership

Received from the sum offor the period ending 30th June 2..... by cheque, money order or cash (delete as applicable)

SignedPositionDate.....

Membership Fees

Single @ \$35	\$.....
Couple @ \$50	\$.....
Student @ \$10	\$.....
Total Fee Payable	\$.....

Signature of Applicant **Date.....**

Payment of membership fees may be made by cheque, money order or cash. Cheques and money orders to be made payable to Berwick Artists Society, Inc. and mailed with membership form to the following address. The Membership Secretary, Berwick Artists Society Inc. PO Box 496 Berwick Vic 3806

Nominator ... I,being a member of the Society, nominate the above applicant for membership of the Society.

Signature of NominatorDate