

APPLICATION FOR MEMBERSHIP

Section One *(This section is for use by the Membership Secretary and Committee only).*

PERSONAL DETAILS

Full Name Mr/Mrs/Miss/Ms

Address

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Post Code Tel: Home: Mobile:

E-mail address

Age Range: under 16 16 –25 26 – 35 36 - 45 46 – 55 56 – 65 over 65

DECLARATION

I hereby apply to join Horsham Amateur Operatic & Dramatic Society (HAODS) and agree to abide by its rules, a copy of which is available on request. I hereby consent to personal data relating to myself being held on computer files and used by the committee for HAODS business.

Signature..... Date.....

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Section 2

(This section will be posted on the Membership Noticeboard).

New Application for Membership

Full Name Mr/Mrs/Miss/Ms

Please state briefly your interests in amateur theatre and name any Society/ies that you have been/are a member:

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Singing range (if known) Soprano Contralto Tenor Bass Are you a dancer? Yes No

Are you interested in working backstage? Props Costumes Set Building Admin

Other (please state)