

## 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 .....

.....

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:

.....  
.....  
.....

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) .....

HAODS House, The Old Ambulance Station, Hurst Road, Horsham, RH12 2DJ

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