



Application for Membership of Warragul Theatre Company Incorporated

I (print full name of applicant and occupation).....

of (address).....

desire to become a member of Warragul Theatre Company Incorporated. In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

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

Print name:

Ibeing a member of the Association nominate

the applicant, who is personally known to me, for membership of the Association.

Signature of Proposer: **Date:**

Print name:

Ibeing a member of the Association second the application of the applicant, who is personally known to me, for membership of the Association.

Signature of Seconder: **Date:**

Print name:

DATE APPROVED: