

**APPLICATION FOR MEMBERSHIP**

**DETAILS**

<b>Name/s:</b>		
<b>Address:</b>	<b>Suburb:</b>	<b>PC:</b>
<b>Phone :</b>	<b>Mobile:</b>	<b>email:</b>
<b>Your Areas of Interest:</b>		
<b>Where did you hear about WTAG:</b>		
<b>Date of Birth:</b>		

Membership fees due by or at AGM in April  
Renewing member PLEASE Tick Box  
PAYMENT

Single Memberships: \$35	Family : \$60
Payment Methods: Direct Deposit-- Money Order-- Cheque--Cash	
Amount:	Date:

<p><b>BANK DETAILS:</b> Bank of Heritage Isle <b>BSB:</b> 723-000 <b>Account No:</b> 5157 OR 100022066 <b>Ref:</b> Surname</p>	<p><b>EMAIL OR POST COMPLETED FORM TO:</b> P O Box 1194, Legana Tas 7277 or EMAIL: wtag1194@gmail.com</p> <p>Make payment payable to West Tamar Arts Group Inc.</p>
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**NOMINATIONS FOR NEW MEMBERSHIP ONLY**

The current below members, of West Tamar Arts Group Inc, know and nominate, applicant above for membership of the Association. Printed names and signatures required.

<b>Nominator 1:</b> <i>print name</i>	<b>Nominator 2:</b> <i>print name</i>
<b>Signature of nominator:</b>	<b>Signature of nominator:</b>

\* West Tamar Arts Group Inc require a copy of a Working with Vulnerable People registration if volunteering with any child related activity. If you do not have one please let the Secretary know.

**Signature of Applicant:** \_\_\_\_\_

**OFFICE USE**

Membership list

Membership Card

For further information, please visit our site at: <http://westtamarartsgroup.com.au/>