

# MEMBERSHIP FORM for financial year 2017 /2018

**Date:**.....

Please include names of children in Family memberships.

Person 1 ..... Group(s) ..... **POSTAL ADDRESS** \_\_\_\_\_

Person 2 ..... Group(s) ..... \_\_\_\_\_

Child 1 ..... Group(s) ..... **PHONE** \_\_\_\_\_

Child 2 ..... Group(s) .....

**email address** .....

**RENEWAL only-  
(no change in details)**

PLEASE NOTE: We will need all details again if membership lapses longer than three months.



PORTLAND CEMA INC. - COUNCIL FOR THE ENCOURAGEMENT OF MUSIC & THE ARTS

A0009300V

**NEWSLETTER DESPATCH:  
Please ensure email supplied.**

Or -  
Tick for mailing to above address   
Please ensure address is supplied.

<u>Membership Fee-</u>	Full Yr (June30)	6 Month (Jul-Dec/Jan-Jun)
<b>ADULT</b>	\$40	\$25
<b>CONC</b> <i>(Student, Pensioner, Carer, Soc. Security or Junior- U18 - please circle)</i>	\$30	\$20
<b>FAMILY</b> <i>(2 Adults, Children U 18)</i>	\$75	\$45

**PAYMENT OPTIONS**

By cheque at Julia Street Creative Space made payable to **Julia Street Creative Space**  
 Note: a Seniors Card is not accepted as a Concession, as this is not means tested.  
 For Direct Debit please pay Portland Cema Inc BSB 063536 Acc:10153032 Ref: Your Name  
 Or send a cheque to **Cema Inc** P.O. Box 385, Portland. 3305

**DONATION: \$** \_\_\_\_\_

**TOTAL: \$** \_\_\_\_\_

FRM1718

OFFICE USE: **To be completed by person accepting money**    Cash    Pers. cheque    Group cheque

DATE REC..... Receipt No..... Issued by.....

**Membership Payment Record**

Cut for Payment Record (optional)



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**Name**..... **Date**..... **Receipt:**.....

IN ACCORDANCE WITH CURRENT PRIVACY LEGISLATION, PERSONAL DETAILS WILL NOT BE DISCLOSED TO ANY UNAUTHORISED PERSONS.  
 Note: New Membership will be pending (associate status only) until Executive approval.