

Act2 Drama Group – Membership Form

Responsible Adult Information

Name		
Address		
EMAIL (print clearly)		
PHONE – Home		
– Mobile		

Name	Age	Allergies/Medical Conditions?	Mobile
			02
			02
			02
			02
			02
			02
			02

Tick the areas you would be interested in:

- | | | | |
|---|--|--|----------|
| <input type="checkbox"/> Acting/Singing/Dancing | <input type="checkbox"/> Directing | <input type="checkbox"/> Choreography | Other... |
| <input type="checkbox"/> Set Building/Painting | <input type="checkbox"/> Producing | <input type="checkbox"/> Makeup/Hairdressing | |
| <input type="checkbox"/> Advertising/Publicity | <input type="checkbox"/> Administration | <input type="checkbox"/> Costuming/Props | |
| <input type="checkbox"/> Musical Direction | <input type="checkbox"/> Sound/Tech/Lighting | <input type="checkbox"/> Backstage Crew | |

Yearly Membership Fees Individual \$40.00
 (Until 1st November 2021) Family \$60.00

Payment details – Pay by internet banking or at any Kiwibank branch.

Account Name:	Act2 Drama Group
Bank:	Kiwibank
Account No.:	38-9019-0799810-00
Date paid:	/ / 2020
Amount:	\$
Reference:	"Membership" [Insert your last name]

Conditions of Membership:

1. I understand that my membership is valid when my membership fees have been paid.
2. I authorize Act2 Drama group to put my contact details on a contact list to enable contact between members, between parents, and between participants in any course, show or production.
3. When I am involved in a show, I accept that my picture, voice or name may be used without payment for the purpose of publicity or promotion of the show and of Act2 Drama Group.
4. I consent to this information about me being collected and held by Act2 Drama Group and utilized for performing shows.
5. I understand that I have the right to access and correct the above information.
6. This consent is given under the Privacy Act 1993

I have read and agree to the conditions of membership.
 (To be signed by the responsible adult)

Complete and return to:

Act2 Drama Group
 14A Havelock Street
 Phillipstown
 Christchurch 8011

Or email

act2dramagroup@gmail.com

