

Auckland Music Theatre Inc  
P.O. Box 44-330  
Pt Chevalier  
AUCKLAND  
[www.aucklandmusictheatre.nz](http://www.aucklandmusictheatre.nz)



**AUCKLAND  
MUSIC  
THEATRE**

**MEMBERSHIP APPLICATION**  
**MEMBER DETAILS**

Full Names(s): \_\_\_\_\_ DOB: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Preferred engagement:**

**Passive:** Send me Newsletters/ show notifications/ special fundraising events

**Active:** I am interested in becoming involved in the following areas (tick below):

Working Bees     Front of House     Hair & Make Up     Props Making

Set Design     Set Building     Set Painting     Costume Design

Sewing     Production Management     Lighting     Sound

Artistic Direction – (Director/Musical Director/Choreographer)     Marketing     Administration or Committee

Other: \_\_\_\_\_

**MEMBERSHIP TYPE (Valid for one year from the date of receipt)**

Single \$35.00     Family (max. 4) \$85.00     Donation \$ \_\_\_\_\_

**PAYMENT**

**Amount: \$** \_\_\_\_\_

EFTPOS     VISA     MasterCard     Bank transfer

Card number:

Printed Name: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_