

## MEMBERSHIP FORM 2026

☐ I am a new member☐ I am renewing my membership

To assist us in updating our membership database (including your individual interests in theatre), please complete this form and return to the Secretary, Launceston Players, PO Box 814, Launceston TAS 7250 or email [secretary@launcestonplayers.com](mailto:secretary@launcestonplayers.com)

**CONTACT DETAILS:** *(Please print clearly)* Please complete the back of this form for up to 4 family members

**Title:**                      **Mr**    **Mrs**    **Miss**    **Ms**    **Dr**    **Hon.**    **Prof.**    **Rev.**    *(please circle one)*

**First Name:** \_\_\_\_\_

**Surname:** \_\_\_\_\_

**Postal address:** \_\_\_\_\_

**Suburb/town:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_

**Phone (H):** \_\_\_\_\_ **Phone (W):** \_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Please note that newsletters and correspondence will be sent to members via **email** unless we are advised.

### SUBSCRIPTION OPTIONS:

☐ **Family\* – \$30**☐ **Single - \$20**☐ **Concession - \$15**

*\*For 2 adults + all children under 18 still living at home*

#### Payment details for direct deposit:

**Bank:** Bank of us

**BSB:** 632-001

**Acct number:** 100070572

**Acct name:** Launceston Players Society Inc

Reference: **Please use your Surname & Initials**

**THEATRE INTERESTS:** Please tick all boxes that indicate your interests in theatre

☐ Acting☐ Backstage crew☐ Costume☐ Dancing☐ Directing☐ Lighting☐ Musical directing☐ Musician☐ Props☐ Social☐ Sound☐ Stage manager☐ Wardrobe☐ Twilight Tappers☐ Other:

I give permission for the Launceston Players and / or its representatives to use photographs, videos and other media containing or depicting myself for Players purposes:      Yes / No    *(please circle)*

### OFFICE USE:

- Membership fee received by:

Amount paid: \_\_\_\_\_

Receipt number: \_\_\_\_\_

**Cash**

**Cheque**

**Direct Deposit**

Date paid: \_\_\_\_\_

Member number issued: \_\_\_\_\_

# OPTIONAL

## Family details – partner *(please print clearly)*

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

- |                                    |   |  |  |
|------------------------------------|---|--|--|
| <input type="checkbox"/> Acting    | <input type="checkbox"/> Backstage crew   | <input type="checkbox"/> Costume           | <input type="checkbox"/> Dancing       |
| <input type="checkbox"/> Directing | <input type="checkbox"/> Lighting         | <input type="checkbox"/> Musical directing | <input type="checkbox"/> Musician      |
| <input type="checkbox"/> Props     | <input type="checkbox"/> Social           | <input type="checkbox"/> Sound             | <input type="checkbox"/> Stage manager |
| <input type="checkbox"/> Wardrobe  | <input type="checkbox"/> Twilight Tappers | <input type="checkbox"/> Other:            |  |

## Family details – child *(please print clearly)*

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

- |                                    |   |                                   |                                  |
|------------------------------------|---|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Acting    | <input type="checkbox"/> Backstage crew | <input type="checkbox"/> Costume  | <input type="checkbox"/> Dancing |
| <input type="checkbox"/> Directing | <input type="checkbox"/> Lighting       | <input type="checkbox"/> Musician | <input type="checkbox"/> Props   |
| <input type="checkbox"/> Social    | <input type="checkbox"/> Sound          | <input type="checkbox"/> Other:   |                                  |

## Family details – child *(please print clearly)*

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

- |                                    |   |                                   |                                  |
|------------------------------------|---|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Acting    | <input type="checkbox"/> Backstage crew | <input type="checkbox"/> Costume  | <input type="checkbox"/> Dancing |
| <input type="checkbox"/> Directing | <input type="checkbox"/> Lighting       | <input type="checkbox"/> Musician | <input type="checkbox"/> Props   |
| <input type="checkbox"/> Social    | <input type="checkbox"/> Sound          | <input type="checkbox"/> Other:   |                                  |

## Family details – child *(please print clearly)*

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

- |                                    |   |                                   |                                  |
|------------------------------------|---|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Acting    | <input type="checkbox"/> Backstage crew | <input type="checkbox"/> Costume  | <input type="checkbox"/> Dancing |
| <input type="checkbox"/> Directing | <input type="checkbox"/> Lighting       | <input type="checkbox"/> Musician | <input type="checkbox"/> Props   |
| <input type="checkbox"/> Social    | <input type="checkbox"/> Sound          | <input type="checkbox"/> Other:   |                                  |