

City of Toowoomba Eisteddfod Inc.

President: Paula Melville-Clark

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TOOWOOMBA QLD 4350
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ABN 59 244 779 276

MEMBERSHIP APPLICATION

(Financial period October 1, 2009 - September 30, 2010)

I.....

wish to join the City of Toowoomba Eisteddfod Inc. as an

ordinary member* professional member ^ (Please tick desired membership level).

Title Mr Mrs Ms Miss (please print all details)

First Name.....Surname

Address

.....

Home phone Work phone Mobile

Email address (please print clearly)

I wish to receive copies of the minutes of the monthly meetings Yes No

Please send the minutes by Email Post

Attached is my membership fee of \$ 25* (ordinary) \$50^ (professional)

^ I would like a hard copy of the Schedule May Program July Program
(Please tick appropriate box)

Signature of applicant.....

Nominated by..... (Signature)

Seconded by (Signature)

* **Ordinary** membership = \$25; entitles member to vote and to receive copies of the minutes.

^ **Professional** membership = \$50; entitles member to vote, to receive copies of the minutes, to receive a season pass to all Eisteddfod events in the Church Theatre and Studio and an 'early bird' PDF of the Schedule and the two Programs (email users only) plus hard copies if requested.

Office Use only

Secretary Recorded in database Treasurer Receipt issued

Membership Accepted Professional Ordinary