

MEMBERSHIP APPLICATION FORM

www.hinterlandband.com.au

(Formed in October 1995)

1. MEMBER DETAILS

FAMILY NAME: _____ GIVEN NAME: _____

CLASS of MEMBERSHIP: *(Please circle)* **1. Ordinary** **2. Student** **3. Associate**
(Musician - Adult) (Under 21) (Non Playing)

INSTRUMENT/s PLAYED: _____

DATE of BIRTH: *(STUDENT Applicants ONLY)* _____ADULTS ONLY: I have a current Blue Card *(Not essential)* YES / NO _____
Expiry Date**2. PERSONAL CONTACT DETAILS**

ADDRESS _____

Suburb / Town State Postcode

HOME PHONE _____ MOBILE _____

EMAIL ADDRESS _____

3. AGREEMENT to CONDITIONS

- a) As a **MUSICIAN MEMBER** *I will be committed to attend rehearsals, performances and events.*
If unable to attend I will inform the band leader in advance and as soon as possible.
- b) As an **ADULT MUSICIAN** *I agree to my details* being registered with the **Queensland Band Association Inc.**
- c) *I agree to my Personal Contact Details ONLY* being made available to other **HCB Members ONLY.**

Signed _____ Date _____

4. EMERGENCY CONTACTS*(Provide AT LEAST ONE Emergency Contact)*

CONTACT'S FULL NAME (1) _____ (2) _____

PHONE NUMBER (1) _____ (2) _____

RELATIONSHIP TO MEMBER (1) _____ (2) _____

Proposed by: _____
(Financial Member) Print Name Signature DateSeconded by: _____
(Financial Member) Print Name Signature Date**Office Use ONLY**

Date Joined: _____ Date Left: _____

*This Register is established and maintained in accordance with the Association's Constitution.*MEMBERSHIP FEES: (Due 1st Jan) **Adult Musician: \$100.00 p.a.** **Student / Associate: \$50 p.a.**

EFT Bank Details: Bendigo Bank BSB: 633-000 HCB Account No: 154 724 025