



TAMAR VALLEY WRITERS FESTIVAL

Application form for Membership of the Festival of Golden Words Inc. (trading as Tamar Valley Writers Festival) for the 2017-2018 Financial year.

I, (name)

(address)

Email:

Telephone:

desire to become a Member of the Festival and a voting Member of the FESTIVAL OF GOLDEN WORDS Inc.

I understand that as a financial Member I will have full voting rights at the Annual General Meeting. I am aware that no Membership privileges will be afforded to me unless I have a current Membership. I agree to be bound by the Rules of the Association for the time being in force.

My payment of the Annual Membership Fee of (CHOOSE ONE) \$35 (one year) \$50 (two years), for Membership is enclosed via (CHOOSE ONE) cheque money order cash, or has been sent by electronic funds transfer (EFT), to: Festival of Golden Words, Inc., Heritage Isle Credit Union, BSB: 807 001, Account No. 6782 S1. (Include your family name on transfer.) Please forward this form to:

The Treasurer, Festival of Golden Words Inc. PO Box 5306, Launceston TAS 7250

Or email festivalofgoldenwords@gmail.com

Signature of Applicant

Date

I am interested in volunteering opportunities. Yes No

I have the following skills

I am able to commit to volunteering (CHOOSE ONE):

immediately from (date) Festival Week only.

Information recorded on this form will remain confidential. Email and other personal information will only be used to inform you about activities associated with the staging of the Tamar Valley Writers Festival 2018.