



# TAMAR VALLEY WRITERS FESTIVAL

Application form for Membership of the Festival of Golden Words Inc. (**Note** now known for trading as the Tamar Valley Writers Festival).

I, (name)

(address)

Email:  Telephone:

desire to become a Member of the Festival and a voting Member of the TAMAR VALLEY WRITERS FESTIVAL.

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., Bank of us, BSB 632 001, Account Number 1001 911 47 (Include your family name on transfer.)

Please forward this form to: The Treasurer, Tamar Valley Writers Festival. PO Box 5306, Launceston TAS 7250 Or email [info@tamarvalleywritersfestival.com.au](mailto:info@tamarvalleywritersfestival.com.au)

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 only (11-13 September 2020)

*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 2020.*