City of Toowoomba Eisteddfod Inc.

ABN 59 244 779 276

PO Box 60 TOOWOOMBA QLD 4350

> Email: toowoombaeisteddfod@gmail.com www.toowoombaeisteddfod.org.au Mobile 0427 709 094

2015 Membership Application or Renewal

(Financial Period October 1, 2014 - September 30, 2015)

I wish to join/renew my membership of the City of Toowoomba Eisteddfod Inc. as an Ordinary Member * Professional Member ^ Title First Name Surname Address Home Phone Work Phone Mobile **Email Address** Minutes of the Monthly Meetings Please send Minutes by: I have paid my membership fee of: by: Direct Deposit Reference Number Signature of Applicant Date Additional Information required from NEW members only -New members must be nominated and seconded by current members of the Eisteddfod Association. Nominated by: Date: Signature: Seconded by: Date:

Signature:

HOW CAN YOU HELP?

The Eisteddfod is run entirely by volunteers.

Please fill in the following and return it with your Membership Application.

I can help in the following ways: (Please indicate as many as possible - though you are not expected to necessarily do all that you indicate. You will be contacted before each Eisteddfod to ascertain your availability during that time).

I am available for May 2015

I am available for July/August 2015

Sponsor a section

Discipline-based or general Sub-committees

Compering

Scribing

Doorkeeping

Ticket-selling

Marshalling

General Office help prior to the Eisteddfod

General Office help during the Eisteddfod (including word processing)

I am unable to help at this time

Accompanists: Would you like your contact details put into the 2015 Programmes?

MAY: Yes No

Please email Please Phone

JULY/AUGUST Yes No

Please email Please phone

OFFICE USE ONLY:

<u>Secretary</u>: Recorded in databases/email groups (Please list below)

Treasurer: Receipt /vouchers

issued:

New Membership Accepted: Professional Membership

Ordinary Membership

2015 Membership Number: