



Application for Membership

FRIENDS OF THE EMPIRE THEATRE INC.

Nominee..... Date.....
 Address..... Phone (H).....
 Phone (W).....
 Postcode..... Mobile.....
 Signature/s..... Date of Birth.....

MEMBERSHIP REQUIRED

(\$10) FRIEND (\$20) SILVER (\$30) GOLD (\$100) PLATINUM
 AMOUNT \$..... CHEQUE CASH MONEY ORDER DEBIT CREDIT CARD
 Mastercard Visa Diner's Club Amex (Processed:...../...../.....)
 Card No: _____ Expiry Date...../.....
 Name on Card..... Signature.....

* (Card payment will be processed at the Box Office after Application has been accepted by the Committee)

Complete this section if you wish to join the volunteer workforce of the Friends of the Empire Theatre Inc.

Please tick your preferences that pertain to the Theatre Front of House duties:

Usher/Doorperson Programme/Merchandise Seller Stage Door Keeper

Please tick any other areas in which you could assist the Friends of the Empire Theatre Inc. and Theatre

Management:

Mailout Newsletter Catering Assistant General Helper Supply Flowers

Mailout Theatre Poster Distributor Tour Guide

Please list any other areas in which you could be utilised to assist the Theatre or Theatre Management:

.....
 Please return the completed Application Form with your subscription of the Empire Theatre Booking Office or
 post to Friends of the Empire Theatre Inc. PO Box 2399, Toowoomba QLD 4350

OFFICE USE ONLY

Nominee..... Phone.....
 Address.....
 Proposer..... Seconder.....
 Acceptance Date..... Receipt No..... Date.....
 Allocated Membership No..... Membership Category.....