

TAURANGA SOCIETY OF ARTISTS INC

APPLICATION FOR MEMBERSHIP

FULL YEAR SUBSCRIPTION – 1 APRIL 2022 – 31 MARCH 2023 \$65

PART YEAR SUBSCRIPTION – JOINING AFTER 1 OCTOBER 2022 \$30

Prospective members may attend activities (except Tutorials, exhibitions and competitions and Art in the Park) as a visitor of the Society for one month, after which they must apply for membership and pay the subscription to attend.

FULL NAME _____

ADDRESS _____

_____ POST CODE _____

EMAIL _____

HOME PHONE _____ MOBILE _____

I would like to receive my newsletter by: Email Post Collection from clubrooms

If you do not have an email address or must have a printed & posted version of the Newsletter a postage fee of \$10 per annum is to be added to your subscription fee.

SUBSCRIPTION PAYMENT: pay by direct credit to Westpac Account Number 03 0435 0457931 00
Please reference the payment with your 'name' and 'new member' so it will be identifiable.

APPLICATION FORM: scan or photograph your form and email it to taurangaartsociety@xtra.co.nz
OR, leave your form in the locked box in the Art Room Foyer, 171A Elizabeth Street West, Tauranga.

All members are expected to assist the Society in some way. Please indicate how you may be able to do this by ticking any of the boxes

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Computer/Committee | <input type="checkbox"/> Exhibitions | <input type="checkbox"/> Library |
| <input type="checkbox"/> Kitchen | <input type="checkbox"/> Catering | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> General | <input type="checkbox"/> Teaching/Workshops – medium: _____ | |

I give permission for my artworks to be photographed and/or my image in photographs to be placed on the Society Website or Society Facebook page or used in articles or advertising in print should that be required. I understand I will retain copyright but no payment for use of the material will be made. Yes No

I agree to abide by the Constitution and Rules of the Tauranga Society of Artists Inc.

I consent to the Tauranga Society of Artists collecting the personal contact details provided in this membership application, retaining and using these details for the purposes of communication with members and disclosing them only when the Committee resolves that the request is in the best interest of the Society and the individual involved. This consent is given in accordance with the Privacy Act 2020.

Signature of Applicant _____

Nominated By _____
(Society Member's Name - please print) (Society Member's signature) (Date)

If you don't know a member to nominate you, leave blank for the committee to complete.

For further information about the Society please refer to www.taurangasocietyofartists.co.nz
or email taurangaartsociety@xtra.co.nz