

**APPLICATION FOR MEMBERSHIP - ARTSNATIONAL SYDNEY 2025**

Please return this signed form to: Carolyn Larkin at [artsnationalsydney@gmail.com](mailto:artsnationalsydney@gmail.com)

**Member Details**

Title	Name
Address	
Post Code	
Email	
Phone Home	Mobile

I wish to attend Lectures at:  12.30pm  6.00pm

Preferred Name for Membership Card (if different from above): \_\_\_\_\_

**Membership Fee**

## Sub-Total

- |                     |                          |          |       |  |
|---------------------|--------------------------|----------|-------|--|
| Member renewal      | <input type="checkbox"/> | \$230.00 | _____ | For 9 lectures in 2025                         |
| Full-time Student*  | <input type="checkbox"/> | \$60.00  | _____ | * Please provide copy of Student ID            |
| Arts Society Review | <input type="checkbox"/> | \$40.00  | _____ | *3 copies incl. postage. Apply before 20.1.24. |

**Total:** \_\_\_\_\_

**Payment Details**

- Cheque Payable to: **ADFAS Sydney Inc.**  
Post to Treasurer: Mr A McWhinnie, 34 Bishops Avenue Randwick NSW 2031
- Internet/bank transfer:  
Account Name: ADFAS Sydney Inc.                      BSB:032 054      Account No: 316 218  
Bank: Westpac                      Reference Field: Your name  
Please email [artsnationalsydney@gmail.com](mailto:artsnationalsydney@gmail.com) to confirm your EFT transfer and return this form.

**Compliance with the Privacy Act:** I consent to have my name and email address added to the ArtsNational database, and for it to be used to provide periodical information to me about ArtsNational activities. You may unsubscribe from these emails at any time.

I consent to my email address being provided to ArtsNational.

I acknowledge that my membership is not transferable.

Public Liability insurance of \$20,000,000 is held by ArtsNational Sydney (Paddington) under the ArtsNational insurance policy with TBIB Insurance.

**Signature:****Date:**