

2026 MEMBERSHIP APPLICATION

Applicant: Title (Optional): Mr/Mrs/Ms or Other.....(Circle as applicable)

| | | |
|---------|------------|--------------|
| Surname | First Name | Phone/Mobile |
| Address | | Postcode |
| Email | | |

Applicant: Title (Optional): Mr/Mrs/Ms or Other(Circle as applicable)

| | | |
|---------|------------|--------------|
| Surname | First Name | Phone/Mobile |
| Address | | Postcode |
| Email | | |

PAYMENT DETAILS

| | | |
|-----------------------------|----------------------------|---------|
| Membership: | \$180 per applicant | \$..... |
| Young Arts Donation: | | \$..... |
| Total Payable: | | \$..... |

PAYMENT METHOD (Tick as applicable) *Note: Cheques are no longer accepted.*

- Internet Banking: BSB: 633-000 Acc No. 162475040 (Payee Name as reference)
- Square Reader: Credit/Debit card at lecture/event

FORM

(Please return this form regardless of payment method)

- Email completed form to: treasurer@launcestonartsnational.org
- Mail completed form to: PO Box 445, Launceston TAS 7250; or
- Bring completed form to the lecture/event.

I agree to my details being used by ArtsNational Launceston in accordance with the Privacy Act of 1988.

Applicant Signature: _____

Applicant Signature: _____