



Armidale Drama and Musical Society Inc.

Membership Form

Full Name: _____

Home Address: _____

Home phone: _____

Mobile: _____

Email: (mandatory) _____

Membership type (Please circle):

Student (Under 18) \$5
If under 18 (unable to vote), please state your age _____

Student (Over 18) \$5

Single \$10

Family \$20

Area of Interest

- Performance**
- Technical (lighting/sound)**
- Backstage/set building/wardrobe**
- Front of House**
- All of the above**
- Other (please specify)**

Rights and responsibilities: [Code of Conduct](http://www.adms.org.au/about-us) may be found here www.adms.org.au/about-us

Please attach cheque and send to:

Membership Secretary
ADMS
309 Beardy Street,
Armidale, NSW,2350

**Or pay directly to:
preferred payment method**

Greater Bank
BSB 637000
Account No: 718444616

Reference: (your name) This is important so we can identify your payment