

**LOWER CLARENCE ARTS & CRAFTS ASSOCIATION INC.**

Ferry Park  
Pacific Highway,  
Macleans NSW 2463

P.O. Box 194,  
Macleans NSW 2463  
ABN 21 306 396 632  
Telephone /Fax (02) 6645 3700  
Email: [ferryparkgallery@westnet.com.au](mailto:ferryparkgallery@westnet.com.au)  
[www.ferryparkgallery.org.au](http://www.ferryparkgallery.org.au)

**MEMBERSHIP APPLICATION**

To the Secretary,

Name:(Mr/Mrs/Ms)First.....Last.....

Name:(Mr/Mrs/Ms)First.....Last.....  
(BLOCK LETTERS PLEASE)

of.....  
STREET TOWN.

Postcode.....Telephone.....

Hereby apply for membership of the Association. As a member, I agree to uphold the aims and objectives and abide by the rules of the Association, take an interest in the Association’s activities and where possible attend General Meetings.

Signature.....Date.....

Signature.....Date.....

Nominated by.....Seconded by.....  
(BLOCK LETTERS) (BLOCK LETTERS)

Signature.....Date.....Signature.....Date.....

The above particulars will be placed in our Membership Register and on occasions used within our Association between our members. This information is NOT for public exposure. Under the present privacy Regulations your permission is required.  
Signature of Applicant (permission granted for above)

Signed.....Date.....

Signed.....Date.....

This application is subject to approval by the Association. You will be notified upon acceptance, and payment of the joining fee and annual subscription will be payable within 28 days of approval notification.

Joining fee is \$1.00 (1 Person) \$15.00 annual subscription  
(Couple at same address) \$20.00 annual subscription  
(Full time student, ID req'd if over 18 years) \$10.00 annual subscription

**Financial Membership  
dates from January 1<sup>st</sup> to  
December 31<sup>st</sup>**

I do not wish to exhibit in the gallery at this time, but would like to be included on the Gallery Duty Roster as a member “Friend of the Gallery” (please circle) YES / NO.

Members wishing to exhibit their works in the gallery must apply to the Secretary for Exhibiting Membership Form.

**Art or craft / Articles to be exhibited :** .....

For office use only: Date Accepted \_\_\_\_\_ Letter Sent \_\_\_\_\_ Receipt No. \_\_\_\_\_  
Card Issued \_\_\_\_\_ Member register Entered \_\_\_\_\_