

MEMBERSHIP FORM

All prospective members of Franklin Players Community Theatre (FPCT) are required to complete this registration form and email it to committee@franklin.org.za

NEW MEMBERSHIP

RENEWAL

CHANGE OF DETAILS

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>
NAME				
ADDRESS 1				
ADDRESS 2				
ADDRESS 3				
TOWN / CITY		MOBILE PHONE		
ZIP CODE		PRIMARY EMAIL		
OCCUPATION		SECONDARY EMAIL		
DATE OF BIRTH		ID NUMBER		

SECTION 2: MEMBERSHIP AND PAYMENT DETAILS

MEMBERSHIP TYPE	MEMBERSHIP TERM	MEMBERSHIP FEE	Please Check
ADULT	Full year : 1 January to 31 December	R200	<input type="checkbox"/>
	Half year : 1 April to 31 December	R100	<input type="checkbox"/>
FULL-TIME STUDENT / SCHOLAR PENSIONER	Full year : 1 January to 31 December	R100	<input type="checkbox"/>
	Half year : 1 April to 31 December	R75	<input type="checkbox"/>
DONATION		R100	<input type="checkbox"/>
		R50	<input type="checkbox"/>
PAYMENT METHOD	Cash <input type="checkbox"/> Online Payment * <input type="checkbox"/>		

* Please use full Name & Surname as reference for online payments ****NO CASH DEPOSITS****

ACCOUNT: FRANKLIN PLAYERS FIRST NATIONAL BANK CHEQUE ACCOUNT: 50400030074 BRANCH CODE: 250655

SECTION 3: MEMBER CONSENT

PERMISSION TO USE PHOTOGRAPHIC IMAGES AND VIDEO:

Photographs and/or video clips of **Franklin Players Community Theatre (FPCT)** members may be used in various FPCT communications including the newsletter, website and Facebook page. Group photographs and/or video clips taken at FPCT events and rehearsals may be used without identifying individual members. For individual photographs and/or video, please indicate your permission for use:

- ☐ FPCT has my permission to use and identify photographs of me.
- ☐ FPCT does not have permission to use and identify photographs of me.
- ☐ FPCT must contact me before using any identified photographs of me in FPCT communications.

SECTION 4: ACCEPTANCE

I hereby agree to be bound by **Franklin Players Community Theatre (FPCT)** rules and regulations as set out in the society's constitution, available on request and at www.franklin.org.za. I hereby acknowledge that I am familiar with the society's constitution and the rules and regulations as set out therein and agree to comply with them.

Date: _____ Signature: _____