



Membership and Renewal Form

Membership Benefits

Thank you for becoming a member of Melbourne's oldest community theatre company. As a member of The Hartwell Players you can:

Be directly involved in each season

Membership is a requirement for actors, directors and production crew and covers your insurance. There are no additional production fees and your membership will cover you for 12 months, so includes any productions you do within that time.

Have voting rights and stand for election to the Hartwell Committee

(for members aged 18 years and over)

We hold an Annual General Meeting, usually in November, which is also a social occasion with Award presentations.

Membership Types

Adult, Concession and Family memberships are available. The concession rate is available to children under 18 and Pensioners.

How to Join

Please complete this form and return it with your payment to:

- The ticket box office before a performance (for those not currently in a show with Hartwell).
- The Production Co-ordinator if you're currently involved in a play.
- Via Direct Deposit. Please scan and email completed form to secretary@hartwellplayers.org.au or give to Production Co-ordinator.
- The Hartwell Players via postal mail

Hartwell Memberships
PO Box 95
Camberwell VIC. 3124

(Cheques should be made payable to The Hartwell Players Inc.)

Personal Details

First Name: _____ Surname: _____

Date of Birth (opt): _____ Phone: _____

Street Address: _____ Suburb _____

Email: _____

Signature: _____ Date: _____

Membership Type

12 Months (please circle)

\$25 Adult

\$20 Adult Renewal

\$15 Concession

\$40 Family (please fill in details below)

Direct Debit Information

Bank Details as follows:

Account Name: Hartwell Players

BSB: 704191

Account Number: 193117

Please use reference MSHIP and your First initial and Surname eg. MSHIPJSMITH

Hartwell Mailing List

Are you happy to receive our bi-monthly newsletter and the occasional email to keep you up to date with auditions and special events? (you can unsubscribe at any time).

YES / NO (please circle)

Family Details

For a Family Membership, please list the extra members of your family. They will also receive notices via email if you include their email addresses below.

Gender	Date of Birth	First Name	Surname	Email
M / F				
M / F				
M / F				
M / F				