



MEMBERSHIP APPLICATION

Please complete this form (one per person) and return with payment to the above address

PERSONAL INFORMATION:

Title: (Circle)	☐ Mr / ☐ Mrs / ☐ Miss / ☐ Ms / ☐ Dr / ☐ Other: _____	Home Phone:	_____
Given Name(s):	_____	Mobile Phone:	_____
Last Name:	_____	Email:	_____
Preferred Name: (if not first name)	_____	Date of Birth*:	_____
Address:	_____ _____	Occupation (optional)**:	_____

* Date of birth is collected from all applicants and is Used to determine your membership category (including Child/Student and Senior Citizen eligibility) and your eligibility to vote at meetings and stand for committee election).

** Occupation - Helps us understand members' skills and interests to support the theatre's activities.

ACTIVITIES & SKILLS:

Please let us know which of the following activities are of interest to you. We will use this information to identify members who may wish to help in certain areas.

PERFORMING:

- ☐ Acting
- ☐ Dancing
- ☐ Singing
- ☐ Musician

PRODUCTION CREW:

- ☐ Directing
- ☐ Choreography
- ☐ Production Manager
- ☐ Stage Manager

PRODUCTION CREW:

- ☐ Lighting
- ☐ Sound
- ☐ Prompt
- ☐ Wardrobe
- ☐ Hair/Makeup
- ☐ Set Construction
- ☐ Artist
- ☐ Stage Crew/Hand
- ☐ Props

OTHER ROLES:

- ☐ Front of House
- ☐ Bar
- ☐ Publicity
- ☐ Design
- ☐ Committee
- ☐ Other (please state):

MEMBERSHIP TYPE & SUBSCRIPTION DETAILS:

MEMBERSHIP TYPE: (Please Tick)

- | | | |
|--------------------------|---|---------|
| ☐ | Child/Student | \$5.00 |
| | <small>(Prof of enrolment required for Tertiary students)</small> | |
| ☐ | Single Adult | \$10.00 |
| ☐ | Senior Citizen | \$5.00 |
| ☐ | Couple | \$15.00 |
| ☐ | Family | \$20.00 |

(All family members including children, please tick family)

PAYMENT METHOD: (Please Tick)

- | | |
|--------------------------|----------------------|
| ☐ | Cash |
| ☐ | Direct Credit |
| ☐ | Credit Card / PayPal |

OFFICE USE ONLY:

Amount: \$ _____
Invoice#: _____
Date: _____
Payment ID: _____
Member ID: _____
Sub ID: _____
Mailing List ☐

Membership period: Membership runs for the calendar year (1 January to 31 December). If you join later in the year, the committee may, at its discretion, extend your membership. The exact dates of your membership will be shown on your payment receipt.

Refunds: Membership fees are non-refundable, except that if your membership application is declined, your fee will be refunded in full.

MEMBERSHIP CATEGORIES:

Child/Student:

- Anyone aged 18 and under
- Tertiary Students (please include proof of enrolment with your application)

Single Adult:

- Any person, aged over 18 and under 65 and does not fall in any of the other categories

Senior Citizen:

- Any person, aged over 65 and does not fall under any of the other categories

Couple:

- Membership for two people in a formal relationship e.g. Married, Civil Union, De facto
- Please complete a separate membership form for each person

Family:

- Membership for any combination of Adults, Children & Grandparents living as family unit at the same address e.g. Mum, Dad and Kids
- Please complete a separate membership form for each member of the family

PAYMENT OPTIONS:

Subscriptions can be paid the following ways:

Cash:

In person at the theatre or by visiting your nearest ASB Bank branch and quoting the details listed under direct credit below. Alternatively, contact us via email (membership@torbaytheatre.com). **Please do not post cash.**

Direct Credit:

Via Internet Banking, or by visiting your bank. Please use the following account details

Account number:	12-3059-0341006-00(0)* (* some banks require three zeroes in the suffix)
Bank:	ASB Bank
Branch:	Browns Bay
Account name:	Torbay Theatre Incorporated

Please use the name of member applying, and 'New Member' as a reference

Credit Card / PayPal:

Payment can be made by Visa/Mastercard or from your PayPal account at www.torbaytheatre.com/join-torbay-theatre/

PRIVACY STATEMENT:

Purpose: The personal information you (and, where the applicant is under 18 years of age, the parent or guardian who signs this form) provide on this form is collected to process your membership application, to administer and manage your membership, to communicate with you, and to maintain the register of members that Torbay Theatre Incorporated is required to keep as an Incorporated Society. Your date of birth is used to determine your membership category (including eligibility for Child/Student membership for those aged 18 and under, and Senior Citizen membership for those aged over 65) and your eligibility to vote at meetings and stand for committee election (for members over 16). The Activities & Skills information you provide is used to match members to performing, production and volunteer roles and opportunities within Torbay Theatre.

Who is collecting and holding it: Torbay Theatre Incorporated ("TTI") is the agency collecting and holding this information. It is held and administered by TTI at its registered address and offices in Torbay, Auckland.

Who may see it: Your information may be shared with TTI's committee and the authorised officers and volunteers who administer membership and organise activities within Torbay Theatre. It will not otherwise be disclosed to anyone else except as permitted or required by law.

Service providers: We use trusted third-party service providers — for example, cloud-based accounting software, and an email service provider used to send you newsletters and notices where you have opted in — to hold and process some information on our behalf. Some of these providers may store information outside New Zealand. They are required to protect your information and use it only for our purposes.

Voluntary: Providing this information is voluntary. However, if you do not provide it, TTI may be unable to process your application or maintain your membership.

Your rights: Under the Privacy Act 2020 you have the right to access your personal information and to request that it be corrected. Please direct any such request to TTI by email at membership@torbaytheatre.com. If you are not satisfied with how TTI handles your information or responds to a privacy request, you may complain to the Office of the Privacy Commissioner (www.privacy.org.nz).

Retention: TTI keeps the information you provide on this form for the duration of your membership and for a reasonable period afterwards, consistent with TTI's record-keeping obligations as an Incorporated Society and a registered charity.

DECLARATION:

Please read, tick and Sign Below:

☒ I agree to be bound by the Constitution and Bylaws of Torbay Theatre Incorporated (as amended from time to time).

☒ I apply for and consent to be admitted as a member of Torbay Theatre Incorporated

☐ I consent to receive electronic communications from Torbay Theatre Incorporated — including newsletters, event notices and administrative notices — by email and/or text message. (Optional: leave this box unticked if you do not wish to receive electronic communications. Leaving it unticked will not affect your membership application.)

☐ Please send me a copy of Torbay Theatre's Constitution upon acceptance of my application.

Signed: _____ Date: _____

PARENT / GUARDIAN CONSENT:

If the applicant is under 18 years of age, a parent or guardian must complete this section. By signing below, the parent or guardian consents to the young person's membership of Torbay Theatre Incorporated and to the collection and use of the information on this form as described in the Privacy Statement.

Parent / Guardian Full Name: _____

Relationship to Applicant: _____

Email: _____ Phone: _____

Signed: _____ Date: _____