

KAPUNDA COMMUNITY GALLERY Inc.



MEMBERSHIP APPLICATION FORM

For 01/02/2016 to 31/01/2017

FEES: Full Member - \$25 (or \$36*if posted)
Concession – all cards - \$15 (or \$26* if posted)
Schools - \$44 (or \$55* if posted)
Individual Primary or Secondary Student - \$2
(* \$11 added to assist KCG if Newsletter is POSTED)



NAME:

ADDRESS:

..... POSTCODE:

PHONE: **MOBILE:**

EMAIL:

(please **PRINT** email address clearly)

APPLICATION DATE:/...../.....

Please tick category: Full membership: Concession: School or Group: Student:

Include Postage: \$ _____ = Total: \$ _____

Paid by:- Cash: Cheque: Money Order: Internet Transfer:

I AM AN ARTIST / PHOTOGRAPHER:

I would like to know more about helping KCG Inc, by: (please tick)

Gallery Attendant duty:

Helping hang exhibitions:

Helping on a sub-committee:

Being a Committee Member:

Assisting with a small regular task:

None of the above:

Internet Transfer to BSB: 105-006 A/C: 056879440

PLEASE reference transfer with Initial and Surname.

Please return this form:-

By Email: kcg@kapundagallery.com

Mail: The Treasurer, PO Box 398, Kapunda, SA 5373

Personally: 67 - 69 Main St, Kapunda S. A.