

SCREENWORKS

n o r t h e r n r i v e r s n s w

PO Box 146 Bangalow NSW 2479

e: info@screenworks.com.au

p: 02 6687 1599

APPLICATION FOR MEMBERSHIP OF ASSOCIATION

Northern Rivers Screenworks Incorporated

(incorporated under the *Associations Incorporation Act 1984*)

Membership is for one year from the date of membership payment

Company/ organisation:.....

Last name:..... First name:

Postal address:

Suburb/ town: State: Postcode.....

Tel: Mob:

Email:

I,

(full name)

hereby apply to become a member of the above named incorporated association.

In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

.....
Signature of applicant and date

I, a member of the association, (full name) nominate the applicant, who is personally known to me, for membership of the association.

.....
Signature of proposer and date

I, a member of the association, (full name) second the nomination of the applicant, who is personally known to me, for membership of the association.

.....
Signature of seconder and date

(The Proposer and Seconder signatures will be filled out by SW Board Members)

MEMBERSHIP TYPE: (see definitions)

- Professional - \$70**
(Please provide your CV by post **and/or** email – info@screenworks.com.au. Include production date, title, your credit and type of production – feature, short drama, documentary, digital media or animation.)
- Emerging Professional - \$45**
(If you have worked on projects across the screen industry platforms please attach your CV including production date, title, your credit and type of production – feature drama, short drama, documentary, digital media or animation.)
- Associate - \$45**
(Associate membership is for those interested in screen industries and screen culture activities.)
- Student/Unemployed - \$30** (photocopy of Student ID or Health Care Card required)
(If you have worked in any capacity on any projects across the screen industry platforms please attach your CV including production date, title, your credit and type of production – feature drama, short drama, documentary, digital media or animation.)

Please State Your Area Of Experience or Interest, up to 3 can be included: (Camera, Director, Producer, Writer, etc.)

PLEASE CIRCLE THE APPROPRIATE BOXES BELOW:

- Male Female
- I identify as Aboriginal or Torres Strait Islander
- I am from a non-English speaking background
- I would like to be included on the Arts Northern Rivers mailing list
- I DO NOT want my contact details to be forwarded to funding bodies/
industry associations

YOUR AGE RANGE:

- 15-24 25-44 44-54 55-64 65+

PAYMENT METHOD:

- cash cheque/ money order Electronic Funds Transfer (EFT)

BSB: 728-728 Account number: 222 63812

Summerland Credit Union account for Northern Rivers Screenworks Inc.*

*Reference: Please put your Surname and Initial plus the word FEE in the reference line.

**PLEASE RETURN WITH PAYMENT AND CV TO:
PO BOX 146 BANGALOW NSW 2479 OR
LEVEL 1, 12 BYRON ST BANGALOW (ENTRY AT REAR)
OR EMAIL info@screenworks.com.au**

for office use only:

payment: cheque cash EFT
date received: _____
receipt sent: _____
card sent: _____
membership #: _____
membership type: _____

