Barn Theatre Membership Application (One form per person)

Title:			Productions at the Barn could not		
Name:			amount of voluntary support by mer willing to help with? You may feel y	nbers. What are you interested in	
Address:			happy to help and guide you until yo	u feel confident in these roles.	
	Post Cod	e:	By ticking your interests below you a		
Tel no Mobile	no.		contacted by other members of the	club in relation to these interests.	
Email address:			Admin/Finance/Office W	ork 🗖	
Date of Birth:			Acting		
I am happy to receive Barn correspondence			Audience only		
This is a membership requirement as we may need to co		the Club, its on-going	Bar Tending		
activities and constitutional affairs - however, we do need your express permission for this which			Box Office	- <u>\</u> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
can be recinded at any time.			Directing		
			House Management		
Yearly Membership Ca	sh/Cheque	Electronic Payment	Interval Coffee		
☐ Youth (under 18)	£20	£15	Lighting		
(Requires signature of parent or guardian below)			Production Managemen	nt 🗖	
			Programme Selling		
Student (over 18 but a full-time student)			Prompting		
☐ Ordinary (18+)	£40	£35	Properties		
☐ Senior (over 65)	£30	£25	Set Building		
COLUMN TO THE PARTY OF THE PART			Set Design		
Payment options			Set Dressing		
By Online Banking/PayPal:			Set Painting		
Account No. 70056408 Sort Code: 0	8-90-78		Sound		
Please reference your entry with your initial, surr		ntify it as 'Subscription'.	Stage Make-Up/Hair		
I confirm that I have transferred the appropriate a		the state of the s	Stage Management		
via Online Banking			Stewarding		
PayPal Assaunt paypal@barntheatre	a so uk		Wardrobe		
PayPal Account: paypal@barntheatre		Rarn Theatre Club Ltd	Wardrobe		
I confirm that I have transferred the appropriate amount to The Barn Theatre Club Ltd via PayPal		Declaration			
			I apply to become a member of the	Rarn Theatre Club and if elected	
By Direct Debit: (using the form oppos	site)		as a member, I undertake to contribute event of it being wound up while I is	ute to the assets of the Club, in the	
By Cheque: Payable to the Barn Theatre Club Limited.			after I cease to be a member, such amount as may be required not exceeding £1, for the payment of the debts and liabilities of the Club		
Send your application form and, if appr	opriate, incl	lude your	contracted before I ceased to be a n	iember.	
completed direct debit mandate or che	eque to:		Signature of parent/guardian:	10 - 1	
Nicel Disc March and C. Discussion	and and the British	- Webser Courts			
Nigel Rive, Membership Director, 21 Ma City, Hertfordshire AL8 7JT.	inaeville Kis	e, weiwyn Garden	Cignottura	Dato	
city, Hertiorusiiii e ALO /JT.			Signature:	Date:	

Direct Debit Mandate

Please complete the form below to instruct your branch to make payments from your account.

To The Manager
Bank/Building Society
Post Code:
Name(s) of the account holder(s):
Account No.
Branch Sort Code:
Your instructions to the Bank/Building Society:
I/We* instruct you to pay Direct Debits from my/our* accoun
are variable and may be debited on various dates. I/we* w inform the Bank/Building Society in writing, if I/we* wish t cancel this instruction. I/We* understand that if any Direct Debit is paid which breaks the terms with this instruction, the Bank/Building Society will make a refund. I/We* understand that the Barn Theatre Club Limited may change the amount
are variable and may be debited on various dates. I/we* winform the Bank/Building Society in writing, if I/we* wish to cancel this instruction. I/We* understand that if any Direct Debit is paid which breaks the terms with this instruction, the Bank/Building Society will make a refund. I/We* understand that the Barn Theatre Club Limited may change the amount and dates only after getting me/us* prior notice. (* Delete a



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Originator's ID: 871293

Barn Theatre Club Limited Handside Lane, Welwyn Garden City, Hertfordshire AL8 6ST. Registered charity No. 284143 www.barntheatre.co.uk