

Essendon Theatre Company  
 A.B.N Number 84.337.262.019  
 PO Box 164  
 Moonee Ponds, 3039  
 Phone: 0422 029 483  
 Email: [essendontheatrecompany@gmail.com](mailto:essendontheatrecompany@gmail.com)



Dear .....

It is a requirement from the essendon theatre company to have all people involved in our current productions to become a member for Insurance Purposes.

**Membership Fees are listed below:-**

**Unemployed / Student      \$15.00                  Single Adult    \$20.00                  Family / Couples    \$25.00**

This entitles you to full membership for **One Financial Year** from the date of payment. You will receive Newsletters and Flyers for future productions for that time. If you need to contact key personnel of the etc committee, their details are below

<b>President:</b>			
<b>Vice President:</b>	<b>John Degabriele</b>	<b>0414 486 139</b>	<b>e-mail: <a href="mailto:essendontheatrecompany@gmail.com">essendontheatrecompany@gmail.com</a></b>
<b>Treasurer:</b>	<b>Christine Nilsson</b>	<b>0400 576 747</b>	<b>e-mail: <a href="mailto:essedontheatrecompany@gmail.com">essedontheatrecompany@gmail.com</a></b>

Would you please complete this form and return it to a member of the company with your payment within the next 7 days.

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**NAME**.....**DOB (optional)** .....

**ADDRESS**.....

**SUBURB**.....**POSTCODE**.....

**PHONE NUMBER**.....**MOBILE NUMBER**.....

**EMAIL ADDRESS**.....

**Membership Amount \$** .....

I agree to become a member of **essendon theatre company** and abide by their terms and conditions.

**Signature**.....**Date**.....