

# ALBANY LIGHT OPERA & THEATRE COMPANY (INC)



## FULL MEMBERSHIP APPLICATION FORM

FINANCIAL YEAR 2025 (January to December)

Direct Deposit is preferred payment into Commonwealth Bank BSB 066 500 A/C 00903799  
Reference i.e. J. Smith membership OR by cash

**Please ensure this form is completed and emailed to  
[Treasurer@alotco.com.au](mailto:Treasurer@alotco.com.au) or place in the Wooden box in the kitchen**

Application process -Treasurer to check payment, Secretary to include on Agenda for Committee to process

<b>ADULT</b>  \$35	<b>JUNIOR</b> Under 18 \$20	<b>FAMILY</b> Parents plus children under 18 \$80
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NAME – please list First and Family name individually	A	JNR	FAMILY	JNR's AGE
<b>TOTAL amount paid by</b>	<b>EFT</b>	<b>CASH</b>		

Main Contact Number \_\_\_\_\_

Postal or Email: please print clearly \_\_\_\_\_  
(This is the address that will be used for membership communications – please complete one only)

**I/We hereby apply to join ALOTCO and by signing below agree to abide by its Constitution, Code of Conduct and By-Laws which can be found on our website.**

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Do you give permission for photos of you/family to be used for publicity purposes?      **YES**      **NO**

Have you had:	Yes or No	If yes how long ago
A Tour of the theatre of all areas		
Been in a Production or helper of a production		
Been a volunteer for Front of House (Usher, Kiosk)		
Involved in the back ground i.e. busy bee helper, Maintenance,		

Do you have any of the following (please circle)

Working with Children      First Aid Certificate      Fire Warden/ Workplace Safety      Test & Tag