**ANNUAL CALENDAR MEMBERSHIP**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | | | | | | | | |
| Phone: | | | Email: | | | | | |
| Postal Address: | | | | | | | | |
| I am applying for (please circle & supply relevant details): | | | | | | | | |
| Membership:  (Please circle to specify type) | Individual  $10 | | | | Family  $20 | | Small or NFP organisation  $20 | Business  or large  organisation  $50 |
| M-ship paid by:  (Please circle) | | Cash | | Cheque | | Bank deposit  (Please reference your name in bank description) | | |
| **NAMCI:** Nightcliff Arts, Music & Culture Inc. (Committee for Nightcliff Seabreeze Festival)  **ABN:** 84 019 096 837  **Postal Address:** PO Box 1018, Nightcliff NT 0814  **Bank Details:**  **Bank:** Bendigo – Nightcliff Community Bank  **BSB**: 633108  **Acct:** 138248703  **Name:** Nightcliff Arts Music Culture Inc | | | | | | | | |
| Your signature *(If you are filling out the form digitally - please type the words “Signed by me” followed by your full name in the field below. For example: Signed by me, Bob Marley).*  :  Nominated by:  ***(Committee Member***  ***Name & Signature)***  Seconded by:  ***Committee Member***  ***Name & Signature)*** | | | | | | Date:  Date:  Date: | | |