



# MEMBER APPLICATION FORM 2025

PO Box 9056, Wynnum Plaza. 4178  
email: mercurywynnum@gmail.com

Date

Name

## Address

Street

Suburb

Post Code

Mobile

Home Phone:

Email:

## POSTAL ADDRESS (if different from above)

Street

Suburb

Post Code

## FULL MEMBER \$10

Per calendar year

- able to participate in productions on stage and support
- able to vote at AGM (conditions apply)
- subscription to newsletters and communications
- entry into members only draw at Gala Nights for free ticket into next production

## EMERGENCY CONTACT (required for all actors and volunteers)

Name

Mobile

Home Phone:

Relationship

## Applicants Signature

On signing this application, I accept that I am bound by the terms of Mercury Theatre Wynnum Inc. Constitution which I have been advised is available on request.