

The Bradford Catholic Players

Application for Membership

The Society's rules state: membership of the Society is open to individuals aged 15 years or over.

PERSONAL INFORMATION

Name: (Mr/Mrs/Miss/Ms/Other)

Address:

..... Postcode:

Telephone: Home: Work: Mobile:

Email: Home: Work:

Date of Birth:

I hereby apply for membership of The Bradford Catholic Players and undertake to observe the rules and regulations of the Society (March 2003). I am interested in and have experience of the following:

	Interest (✓)	Experience (brief details only please)
Acting		
Singing		
Dancing		
Back-Stage		
Administration		
Social Activities		

Please tick (✓) which of the following best describes your vocal range	1 st Soprano		1 st Alto		1 st Tenor		Not sure	
	2 nd Soprano		2 nd Alto		2 nd Tenor		None of these	
	Not sure				None of the above			

Supporting statement:

OTHER INFORMATION

Is there anyone else in your household who is a BCP member? YES / NO (Please circle as appropriate).

If you are a church-goer, which Church do you usually attend?

Emergency Contact: Name Tel. No.

Wedding Anniversary Date:

If you hold a NODA medal and or bar, please state which, the awarding society and the year each was awarded.

Type of Award	Society & Year	Type of Award	Society & Year
25 Year – Long Service Award		50 Yrs – Gold Bar, Ribbon & Cert.	
30 Yrs – Silver Bar		55 Yrs – Stud	
35 Yrs – Silver Bar		60 Yrs – Diamond Bar	
40 Yrs – Silver Bar		65 Yrs – Stud	
45 Yrs – Silver Bar		70 Yrs – Stud	

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AT NO EXTRA COST TO YOU. If you pay more than £7.00 per year in tax then we can claim 28% of your subscriptions back, making £25 into £32.

If you prefer us **NOT** to claim Gift Aid on your subscriptions please tick this box

PROPOSER & SECONDER

Your application for membership must be proposed and seconded by two fully paid-up members of the BCP and should be accompanied by your first year's subscription.

Proposed by: Name (*block capitals please*)

Signature:

I have known this person for years / months / weeks (*please delete as appropriate*)

Seconded by: Name (*block capitals please*)

Signature:

I have known this person for years / months / weeks (*please delete as appropriate*)

REFERENCES

If you are not personally known by the BCP members who have proposed and seconded you, please supply the names and addresses of two people who can provide a personal reference for you.

Reference #1

Name:

Address:

How is the referee known to you?

How long have you known the referee

Reference #2

Name:

Address:

How is the referee known to you?

How long have you known the referee

FOR OFFICIAL USE:

Form Received	Subscription	Reference #1	Reference #2
	See notice board		
Considered	Verified	Ack and Rules Sent	Voice Part

The information contained within this document is for internal Society use only and will not be disclosed externally.