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|  | **GLEN EIRA ARTISTS’ SOCIETY INC.**  Registration No. A0053616G ABN 72-436-357-743  P.O. Box 3267, Murrumbeena 3163. Tel: 0419 890 772 Email: [geasmember@gmail.com](mailto:geasmember@gmail.com) |

**MEMBERSHIP APPLICATION**

**Please circle appropriate box**

|  |  |
| --- | --- |
| **APPLY** | I am over 18 and wish to become a member of the Glen Eira Artists’ Society (GEAS) Inc. |

Name: ………………………………………………………………………………………………………………………………………

Address: ……………………………………………………………………………………….… Post Code…………………..

Phone/s: Home/Business…………………………………….… MOBILE……………………………………………….

E-mail: …………………………………………………..… Website: …………………………………………………………

Emergency contact (optional): NAME: …………………………...………………… TEL/MOBILE……………….……….

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| I agree to be bound by the Rules of the Society currently in force. (Please refer to website <http://www.gleneiraartistssociety.org/membership.html>). | Signature: ……………………………………………………………  Date: …………………………………………………………… |

**Membership fees: Payment details:**

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| * Joining fee: $25 * Annual subscription fee: $35 (payment due on 1 July of each year). *(as of 1st July 2025 new fees will apply – $50 full, $35 consession)*   **Note**: **Receipts will be issue upon request.** | Electronic transfer  Bendigo Bank:  BSB 633-108 Account No. 138765797  **When making a payment (cheque or electronic) please write your name and use the following codes:**  **S** (Subscription) **J** (Joining fee)  **SA** (Studio Art) **X** (Exhibition)  **LD** (Life Drawing) **M**  (Mentoring) |

**Please indicate** your art interests (e.g. painting, drawing, photography, sculpture, speaking, teaching, organising art tours, writing about art etc.)

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**GEAS depends on members’ support. Please tick a minimum of two areas that you can be of assistance:**

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| * Member of the managing Committee * Convenor of one of GEAS activities * Member of the Exhibition Sub-Committee * Coordinating events * Publicity and promotion | * Editing/publishing newsletter * Website management * Website/Facebook/Newsletter content * Submission work (grant applications) * Other (please specify) |

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**FOR OFFICE USE ONLY**

Date Application received …………………………………… Date membership approved ….…………………………….

I, ………………………………………………………., member of the Society, **nominate** the applicant, who is personally known to me, for membership in the Society.

Signature: …………………………………………………………… Date: …………………………………………………

I, ……………………………………………………., member of the Society, **second** the nomination of the applicant who is personally known to me, for membership in the Society.

Signature: ……………………………………………… Date: ……………………………………………………….…

**For further information:** Membership Officer – M: 0419 890 772 e-mail: [geasmember@gmail.com](mailto:geasmember@gmail.com)