



## MEMBERSHIP FORM

Name.....

Address.....

..... Post Code .....

Telephone number(s) .....

E-mail .....

*Please note that during productions/events, photographs may be taken for the use of marketing/publicity*

*As part of our communications, I agree to my email address being included on the TP database. This is not available to third parties, only within the TP membership.*

Signature ..... Date.....

**Joining Fees (please tick relevant box):**

Full members  £20.00

Full members in full time education  £15.00

*12 months after the Joining Fee payment is received, there is an option of a rolling membership,*

**Payments can be paid on the day of your meeting'**

*Please hand cash payments and completed form to a committee member or post cheques and form to:*