

# **Membership Form**

#### **Our Mission:**

"To promote, protect, prepare, and preserve entertainers, visual artists, and technicians in Bermuda."

### Please Complete the Following:

| NAME:                                 |  |
|---------------------------------------|--|
| GENDER                                |  |
| DATE OF BIRTH                         |  |
| ENTERTAINMENT CATEGORY                |  |
| HOME TELEPHONE:                       |  |
| WORK TELEPHONE:                       |  |
| CELL PHONE:                           |  |
| EMAIL ADDRESS:                        |  |
| NEW MEMBERSHIP (\$100):               |  |
| ANNUAL MEMBERSHIP RENEWAL (\$80):     |  |
| YOUTH MEMBERSHIP (18 & Under - Free): |  |
| APPLICATION DATE:                     |  |
| SIGNATURE OF APPLICANT:               |  |
|                                       |  |

| Total Payment Due:   |        |  |  |
|----------------------|--------|--|--|
| Payment Method Cash: | Check: | Direct Deposit to NTB Acct #20006060388922100: |  |

### Please ensure this form is completed fully and correctly

# **For Official Use Only**

| Date Received                       |  |
|-------------------------------------|--|
| Date Approved /Denied               |  |
| Reason(s) for Denial                |  |
| New Membership                      |  |
| Annual Renewal                      |  |
| Youth Membership                    |  |
| Amount Paid                         |  |
| Payment Method                      |  |
| Membership Number                   |  |
| Invoice Number                      |  |
| Special Notes                       |  |
| Signature of Executive Board Member |  |