



Membership Application Form

Name _____

Address _____ Postcode _____

Telephone (home) _____ (mobile) _____

Email _____ DOB _____

Membership Fees

PLEASE CIRCLE MEMBERSHIP CHOSEN

| | 1 YEAR | 5 Years |
|-----------|--------|---------|
| Adult | \$5.00 | \$20.00 |
| Pensioner | \$2.00 | \$8.00 |
| Kids U18 | \$2.00 | \$8.00 |

Payment can be made by cash or direct deposit to:
 HAY COMMUNITY RADIO ASSOCIATION INC.
BSB:633000 ACC:170201719
 REF: (YOUR NAME) MEMBERSHIP

Choose three songs/artists you love to hear that we can play for you

- (i) _____
- (ii) _____
- (iii) _____

Terms and Conditions

I understand and agree to abide by the Policy and Procedures, Rules, Regulations and Standards as stipulated by Radio 2HayFM and the Community Radio Broadcast Code of Practice when accepting membership to Radio 2HayFM.

I acknowledge that I must be a financial member of Radio 2HayFM to claim any entitlement related to being a community member of 2HayFM Community Radio.

I understand and acknowledge that my membership is subject to Board approval and that the Board can refuse or revoke my membership in accordance with the Membership Policy.

Membership fees are payable on signed application and are not refundable under any circumstances.

Signed _____ Date _____

Witnessed _____

Member number : _____ (Office Use Only)