

2024 Application for Membership

Orchestra Wellington is an incorporated society named "Wellington Regional Orchestra Foundation (Incorporated)" (the "Society"). Under the Constitution of the Society, all Board Members must also be Members of the Society.

This entitles Members to attend, nominate and vote for Board positions at the Annual General Meeting and take part in Meeting proceedings.

To apply for Membership of the Society, please complete and sign the "Application" section below and send it to Orchestra Wellington. Membership of the Society must be established by the start of the Annual General Meeting held at **Te Auaha at 5.45 PM, Monday 29 April 2024,** except Life Members, for whom this process is unnecessary.

The Board has also fixed a **Membership Fee of \$10** to be paid by each Member (Life Members excluded) for the upcoming year, and a concession rate of \$5 for any Members under 20 years of age or music students. Please include payment for Membership dues with the form below.

Upon receipt, the "Confirmation" section will be returned to you confirming you as a Member of the Society. Please contact Beckie Lockhart, General Manager, or Margaret Myers, Event Manager, if you have any questions.

1,		, apply to become a	
[insert full name] 2024 Member of the Wellington Regassociated Membership Fee of \$10.		Foundation (Incorporated) and enclose t	he
Signature	Date		
Address			
Telephone	Emai		
I would like to pay by (please tick):			
Credit Card (complete details be	low)		
Credit Card details (tick one)	U Visa	☐ Master Card	
Name on card	 		
Card no.		O CVC	
Expiry date	Signature		
Send your Membership form, plus c	redit card details,	to:	
Freepost 652 (no stamp required) Orchestra Wellington PO Box 11977 Wellington 6142			
Or, email these materials (credit car	d payment only) to	o margaret@orchestrawellington.co.nz	
2024 Confirmation of Membership	to be complete	ed by Orchestra Wellington Board]	
Name			
The Board of the Wellington Region accepts your Application for Membe	al Orchestra Four ership and associa	ndation (Incorporated) acknowledges and ated Membership Fee.	ţ
On behalf of Board	Date	Amount received	