

**GOOSEBERRY HILL ARTS & CRAFTS GROUP
MEMBERSHIP APPLICATION**

APPLICANT INFORMATION

Name of Applicant:

Name of Business (if applicable):

ABN (if applicable):

Street address:

Postcode:

Home Phone:

Mobile:

Email:

Website:

Date of Birth:

ARTEFACTS FOR EXHIBITION

Category of Art or Craft:

Description of items to be exhibited:

Please provide samples for the members to see, clearly marked with prices, or provide photographs where artefacts are too large. NOTE: Art or craft that duplicates items already exhibited by other members will not be permitted.

Do you have stallholders insurance? Yes No Please attach copy of policy confirmation

Please give details of other venues at which you exhibit.

SIGNATURES

Signature of applicant:

Date:

OFFICE USE ONLY

Date Application Received:

Presented at Meeting on (date):

Approved: Yes No

Applicant notified (date):

*Please post the completed form to Helen Armstrong, PO Box 481, Kalamunda WA 6926, or email to
helen_armstrong@rocketmail.com*

