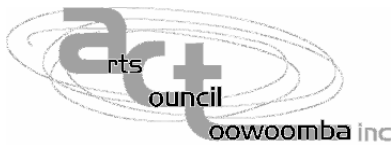


Amiigoon for Mmeshiq



PO Box 1421 Toowoomba Qld. 4350  
Winner of Toowoomba Australia Day Arts / Culture Award 2007



**Application for Membership**

**Our mission statement is:**

To showcase Toowoomba and region as a vital and creative centre for the arts.

**Our objectives:**

1. To provide an umbrella organisation for the local arts community;
2. To build membership of the Arts Council Toowoomba and audiences for the arts in Toowoomba;
3. To develop and programme arts events;
4. To establish a community arts centre.

An applicant for membership must be proposed by a member of Arts Council Toowoomba (the Proposer) and seconded by another member. If you do not know any members, the proposer and seconder will be added in committee.

**NAME & SIGNATURE OF PROPOSER:** \_\_\_\_\_

**NAME & SIGNATURE OF SECONDER:** \_\_\_\_\_

**APPLICANT TO COMPLETE:**

- I support the objectives of Arts Council Toowoomba
- I would like to become a member of ARTS COUNCIL TOOWOOMBA
- Single                       Family                       Affiliated Organisation / Corporate Member

**Name(s):** \_\_\_\_\_

**Name of Organisation / Corporation (if applicable):** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If an Organisation / Corporation, please give details of your designated members:**

**Name 1:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name 2:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**APPLICANT SIGNATURE**

- I / we would like to be a volunteer for ARTS COUNCIL TOOWOOMBA (ACT)
- I would prefer to receive newsletter by:  Post
- Email (helps keep our costs down to enable us to spend more on projects)