

2017 - 2018 MEMBERSHIP FORM

Please complete this form and submit with your \$30.00 membership fee.

A member concurs with the purpose of The Mudds, will be bound by the Mudds Constitution, and will behave in a manner that will not bring The Mudds into disrepute or censure.

NAME:		
PHONE NUMBER:		
ADDRESS & POST CODE:		
EMAIL ADDRESS:		
BIRTH DATE (DD/MM/YYYY)*		
, , ,		
*This information is needed for the accident insurance w	which covers all Mudds members.	
•		
Besides productions, selling Nevada tickets is the Mudde	• •	-
commitment, all members are expected to serve at leas	· · · · · · · · · · · · · · · · · · ·	
member is under the legal age to sell Nevada tickets, pa	rents or guardians are required to serve on their beha	alf.
Diseas in disease and market for New death in		
Please indicate any preference for Nevada shift		
(i.e. Saturday pm only):		
	1	
	Amount Submitted :	\$
PRIVACY CONSENT		
In conjunction with the Privacy Policy of the Mississippi M Mudds, I hereby agree to the following:	Audds of Carleton Place ¹ , as a member of the Mississip	pi
1. As a member of the cast or crew of any Mudds product		
newspapers, social media and/or on the Mudds web site.		
2. I will not use or disclose personal information such as r	names, addresses (including e-mail), telephone numbe	rs of any
Mudds members to any third party for any reason.		
Member Name:		
Consent Signature:	·	
Does Not Consent:		
Date: 1 The Privacy Policy can be viewed by going to www.n		
The Privacy Policy can be viewed by going to www.n	nississippimudds.ca and following the links through	h the

Members tab.