

Hay Community Radio Association

PO Box 309 Hay 2711



Membership Application Form

12 month membership period - 1st July 2017 – 30 June 2018

Name _____

Address _____ Postcode _____

Telephone (home) _____ (mobile) _____

Email _____ DOB _____

Membership Fees

PLEASE CIRCLE MEMBERSHIP CHOSEN

Children (up to age 15)	\$ 2.00
Adults	\$ 5.00
Pensioner / Health Care Card Holder	\$ 2.00

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 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 _____ 2HayFM Position _____