

BLODS

BEXHILL LIGHT OPERATIC DRAMATIC SOCIETY

MEMBERSHIP APPLICATION FORM

Please complete the form below and return, with correct fees, to:

BLODS, P.O. Box 142, St. Leonards-on-Sea, TN38 1DN

Address

Name: Mr/Mrs/Miss/Ms.

Address:

..... Postcode:

Telephone Numbers:

Email:

Date of Birth:

Membership Details

Tick one of the following boxes:

I am interested in Acting Membership - £20 (pa):

I am interested in Non-Acting Membership - £10 (pa):

I am interested in becoming a Friend of the BLODS - £10 (pa):

Vocal range: Soprano Alto Tenor Bass

Previous stage experience:

.....

Previous dancing experience:

.....

Are you interested in back stage work?:

Signed: Date:

Recommendations

Is there anyone you can recommend that may be interested in joining BLODS?

Name: Mr/Mrs/Miss/Ms.

Address:

..... Postcode:

Telephone Numbers:

Email:

Date of Birth: