



**Titirangi Community Arts Council**  
**Membership Form**  
*(please print clearly)*

Complete and return with payment to: **TCAC, PO Box 60-109, Titirangi, Auckland, 0604**

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

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

\_\_\_\_\_

\_\_\_\_\_

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

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

Circle one of the following:      **New Member / Renewal**

**1 Year**

**Student/Unwaged**      \$11.50

**Single**      \$16.50

**Family**      \$22.50

**Donation (Tax Free)**      \$.....

Make cheques payable to: **Titirangi Community Arts Council**

Online payments to: **ASB 12 3100 0108063 00**, Name: **Titirangi Community Arts Council**.

Please use Reference: **(your surname) Subs**

**Note:** For online payments, please email advice and contact details to [upstairs\\_lopdell@xtra.co.nz](mailto:upstairs_lopdell@xtra.co.nz)