**MEMBERSHIP APPLICATION FORM**

Please return this completed form to:

governance@thekenton.org.uk

or

Company Secretary

The Kenton Theatre (Henley-on-Thames) Management Society Limited

19 New Street

Henley-on-Thames

Oxon

RG9 2BS

**To the Trustees of the Kenton Theatre (Henley-on-Thames) Management Society Limited**

I would like to become a member of The Kenton and ask that you present my application for approval at the next Board Meeting.

|  |  |
| --- | --- |
| Name |  |
| Contact number/s |  |
| Address |  |
| Email |  |
| Occupation |  |
| What is your connection with the Theatre? |  |
| When did you last attend The Kenton and what did you see? |  |

|  |  |
| --- | --- |
| Are you willing to support the Theatre as a volunteer in a Front of House role or another role? Or do you have any particular skills you wish to offer? |  |
| Reason for your application | Please attach a statement of between 200 and 300 words explaining why you wish to join the Society. |

Please tick the box to confirm that you are happy to receive all communications by email.

I confirm that I wish to further the Objects of the Society.

I understand that The Kenton is a charitable company limited by guarantee, and that I therefore do not acquire any financial benefit or participation by my Membership. I have a small financial obligation: in the unlikely case The Kenton becomes bankrupt, I guarantee to contribute the sum of £1 towards the payment of its debts.

I confirm that I am over 18 years of age.

**……………………………………………………………………… SIGNATURE**

**………………………………………………………………………. PRINT NAME**

**………………………………………………………………………. DATE**