

Registration & Contribution Form

Creativity Australia, Level 1, 10 Dorcas Street, South Melbourne. VIC 3205
withonevoice@creativityaustralia.org.au | 03 8679 6088



CHOIR VOLUNTEER TO COMPLETE BEFORE SENDING

Membership Type

Choir: _____

Date: _____

Volunteer Name: _____

General member

Carer

Free member

Facility Resident

I have checked all fields are complete and legible

NDIS Participant (self-managed only)

Your Details

Please complete all fields.

First Name:				Family Name:				Gender:	
Mobile:				Email:					
Address:									
City:				State:		Post Code:			
Your Age:	<input type="checkbox"/> 12 – 25	<input type="checkbox"/> 26 - 40	<input type="checkbox"/> 41 - 55	<input type="checkbox"/> 56 - 70	<input type="checkbox"/> 71+				
In which country were you born?									
What would you describe your ethnic/cultural background as?									
What language do you speak at home?									
Do you experience any of the following? Disability, impairment, financial hardship Please specify									

Emergency contact details

Name:			Relationship to you:	
Mobile:			Home phone:	

Employment status

Please tick which of following statements best reflects your current situation:

A: Working I am employed full-time I am employed part-time Industry _____

B: Not Working I am seeking employment I am retired I am a student Other _____

Reason for joining

To assist with research and grant support, please tell us why you have joined our With One Voice choir, please tick:

<input type="checkbox"/>	To sing/perform	<input type="checkbox"/>	Because it is nearby	<input type="checkbox"/>	Because I know other choir members
<input type="checkbox"/>	To try something new	<input type="checkbox"/>	Because of the conductor	<input type="checkbox"/>	To connect with my community
<input type="checkbox"/>	To help others	<input type="checkbox"/>	To share supper	<input type="checkbox"/>	Other _____

How did you hear about us?

<input type="checkbox"/>	Internet search	<input type="checkbox"/>	From Friends/Family	<input type="checkbox"/>	From a choir member	<input type="checkbox"/>	Workplace	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Instagram/Twitter	<input type="checkbox"/>	Referral from Agency/NDIS	<input type="checkbox"/>	Facebook	<input type="checkbox"/>	Online Listings	<input type="checkbox"/>	

Photography Consent

Photographs and videos are sometimes taken at rehearsals and performances to share the the choirs are doing. These may be included online, in print and in social media.

I consent to photographs being used for these purposes: _____

signature

Creativity Australia is a DGR registered Charity.

Choir participation is a tax-deductible donation

Member contributions are the **main way we raise the funds needed to deliver your choir**. Your contribution will help us cover the costs of music resources, accessible venues, suppers and importantly our wonderful conductors. We appreciate that we have people of all different circumstances. What is important is that people contribute what they can, so that people who genuinely cannot afford to, are still able to participate. Your contribution allows the choirs to run smoothly.

STEP 1: AMOUNT & FREQUENCY

Please refer to the attached flow chat "How much should I pay" to complete this section

I am able to contribute: \$ _____ MONTHLY or QUARTERLY or ANNUALLY

STEP 2: The Giving Circle - an additional donation to the program (optional)

By contributing to the **GIVING CIRCLE**, you are assisting another less-fortunate person to experience With One Voice. Please consider your capacity to help others.

I would like to make an additional contribution of: \$ _____ ONE-OFF or ANNUALLY

STEP 3: PAYMENT METHOD

Regardless of the frequency of payment, credit or debit cards are the easiest and most cost effective to process and administer. If you wish to pay with cash, you will need to discuss with your choir's finance volunteer.

OPTION 1: Direct debit from nominated bank account

BSB: _____ Account number: _____ Account name: _____

OPTION 2: Credit or debit card

Visa Mastercard

Name on card: _____ Card holder's signature _____

Card number _____ Expiry (MM/YY) _____ CCV# _____

You must advise Creativity Australia in writing that you wish to cancel your automatic *With One Voice* contribution fees.

I authorise Creativity Australia (this is the name that will appear on your credit card statement) to charge my credit card for my membership. If Creativity Australia is unable to process my payment I will be responsible for an alternative payment arrangement. By signing this authorisation, I acknowledge that I have read and agree to all of the above information and warrant all information is true and correct.

OPTION 3: Direct bank deposit to Creativity Australia

Account number: 1031 8037 BSB: 063 225 Account name: Creativity Australia

NOTE: Please use your surname as the transaction reference and email transaction number to us

OPTION 4: Cheque - I have attached a cheque payable to Creativity Australia for \$ _____

NOTE: Please use your full name as the reference for the cheque

PRIVACY STATEMENT

"The information that we collect from you on this form includes your personal information. Your personal information is protected by law, including by the Commonwealth Privacy Act. The client management system that we are using is an IT system called the 'Data Exchange'. This system is hosted by the Australian Government Department of Social Services. Your personal information that is stored by the Department on the Data Exchange will only be disclosed to us for the purposes of managing your case. The Department de-identifies and aggregates data in the Data Exchange to produce information for policy development, grants program administration, and research and evaluation purposes. This includes producing reports for sharing with service providers. This information will not include information that identifies you, or information that can be used to re-identify you, in any way. You can find more information about the way the Department will manage your personal information in the Department's APP privacy policy, which the Department has published on its website. This policy contains information about how you may access the personal information about you that is stored on the Data Exchange and seek correction of that information. This policy also includes information about how you may complain about a breach of the Australian Privacy Principles by the Department, and how the Department will deal with your complaint."

HOW MUCH SHOULD I PAY?

Creating and supporting my local community is very important to me

I am financially self sufficient

My income covers only the essentials

Supporting myself and paying my way is my primary focus

I want to and am able to support the choir and contribute to the Giving Circle because I know I'm more fortunate than others

I regularly contribute to my local community

HOW DO YOU SUPPORT YOUR LOCAL COMMUNITY?

I do and give what I can but I don't have much

I have the money to pay my full membership and contribute some extra to the Giving Circle for others less fortunate

I can afford to pay my full membership contribution

\$85 per month or \$255 per quarter

\$65 per month or \$195 per quarter

\$50 per month or \$150 per quarter

SUGGESTED CHOIR CONTRIBUTION

\$35 per month or \$105 per quarter

\$25 per month or \$75 per quarter

\$15 per month or \$45 per quarter