

Registration Form

Contact Details

Individual Artist's Full Name: _____
or (first name) (middle name) (surname)

Group/Company/Organisation Name: _____

Postal Address: _____

Postcode: _____

Phone No: (BH) _____ (AH) _____

Mobile No: _____ Fax No: _____

Contact Name: _____

Email Address: _____
(mandatory to receive e-newsletter)

Website: _____

I wish to have the **above three** contact details given out to the general public upon enquiry or available to the general public online.

Art Medium Professional Hobby

Please ✓ one or more (please specify art form/speciality area)

Performing Arts
Art Form (eg singer, dancer, theatre group, choir) _____

Style (eg classical, jazz) _____

Visual Arts
Art Form (eg sculpture, watercolour, art society) _____

Style (eg landscape, abstract) _____

Composer/Author/Designer
Specialty Area (eg a cappella songs, crime, computer design) _____

Arts Service Providers
Specialty Area (eg sound engineer, art shop, picture framer) _____

Arts Venue/Administrator
Specialty Area (eg exhibitions, events, 400 seat theatre, pottery workshop)

Teacher
Specialty Area (eg high school art, private piano) _____

Other
Please specify _____

Any other comments or anything you would like us to know about your service or activity? _____

Privacy Statement: The information on this form is being collated by Council for the purpose of participation in Artzone only. We will not disclose your personal information to a third party without consent except where required by law or other regulation. All data will be treated confidentially according to the Privacy Act.

Signature: _____ Date: _____

Please return Artzone Registration Forms to artzone@maroondah.vic.gov.au or Artzone, Arts and Cultural Services, Maroondah City Council, PO Box 156, Ringwood 3134.