



Queanbeyan Community Radio
QBN FM Inc
 261 Crawford Street Queanbeyan
 PO Box 728 Queanbeyan NSW 2620
 Telephone Studio: 02 6299 6899
 Facsimile Studio: 02 6299 6804

Application for Membership of Association

(incorporated under the Associations Incorporation Act 1984)

I/We _____ (name1)

_____ (name 2)

Of _____ (address)

Occupation/s _____

Phone Contact _____ E-mail _____

hereby apply to be a member of the abovementioned incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

Applicant/s Signature _____

Date _____ Children under 18 years _____

Type of Membership

Interests as a Volunteer (Please indicate)

(1 July – 30 June annually)

- | | | | |
|----------------------|-------|-----------------------|-------|
| a) Single (\$30) | _____ | Listener | _____ |
| b) Concession (\$20) | _____ | Presenter | _____ |
| c) Family (\$45) | _____ | Committee | _____ |
| d) Corporate (\$75) | _____ | Clerical/Receptionist | _____ |
| e) Gold (\$150 life) | _____ | Maintenance | _____ |
| f) Associate | _____ | Other | _____ |

Type of Music Interests _____

<p>DO NOT ATTACH OR SEND ANY MONEY WITH THIS APPLICATION FORM</p> <p>MEMBERSHIP FEES ARE PAYABLE ONLY AFTER ACCEPTANCE OF YOUR APPLICATION BY THE</p> <p>COMMITTEE OF MANAGEMENT</p>



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**1. Queanbeyan Community Radio QBN FM Inc
Volunteer Contract**

- ❖ I accept the on-air or off-air duties as agreed with the Station Manager.
- ❖ I accept, unless otherwise specified, that Queanbeyan Community Radio QBN FM Inc (hereinafter referred to as 2 QBN FM 96.7) retains the ownership and copyright in all material produced at the Station.
- ❖ I accept 2 QBN FM 96.7's policies and procedures as set out in its Policies and Procedures Manual, and should disagreement arise, I acknowledge the grievance procedures set out therein as the appropriate avenue for conflict resolution.
- ❖ I will ensure that all programs I make will comply with all codes, regulations and legislation relevant to community broadcasting.
- ❖ I accept it is my responsibility to obtain a signed licence agreement from the appropriate copyright owner/s for use of material not already covered by existing 2 QBN FM 96.7 licence agreements.
- ❖ I accept that 2 QBN FM 96.7 reserves the right to censor, edit and amend any program material I present for broadcast.
- ❖ I will inform the Station Manager and/or Committee of Management, within 48 hours, of any complaint concerning my program or any incidents that might lead to a complaint.
- ❖ I will not, without the prior approval from the Committee of Management, comment publicly on the operation of 2 QBN FM 96.7 or of any member of the Association.
- ❖ I will treat other volunteers, guests of the station, staff and the Committee of Management with consideration and respect.
- ❖ I accept that 2 QBN FM 96.7 will take every care with recorded material left by me at the station but cannot accept any responsibility for loss or damage.
- ❖ I will treat Station equipment, facilities and property carefully.
- ❖ I will use Station equipment and facilities for the production and preparation of my program and for no other purpose without the prior consent of the Station Manager.
- ❖ I will not remove Station equipment or property on any occasion without first having obtained permission from the Station Manager.
- ❖ I will not make commercial representations on behalf of 2 QBN FM 96.7, to any person or organisation without prior written authority from the Committee of Management.
- ❖ I acknowledge that a breach of the any of the above listed conditions may result in the suspension or termination of my broadcast rights.
- ❖ I acknowledge 2 QBN FM 96.7's grievance procedures as the appropriate avenue for conflict resolution.
- ❖ I formally indemnify 2 QBN FM 96.7 and hold it indemnified against all actions, suits, claims, losses and/or damages arising out of and consequential upon anything recorded by or broadcast on my behalf.

Date _____

Volunteer (full name) _____

Address: _____

Tel (day): _____ Tel (ah): _____

Mob: _____ e-mail: _____