

MEMBERSHIP FORM

July 1st, 2023, to June 30th, 2024

Date:		
Last Name:_	:First Name:	
Address:		Postal Code:
Home phone	ne: Cell phone:	
Email addres	ess:	
Volunteer in	interests, please circle: ACTING, PRODUCING, DIRECTI	NG, STAGE MANAGER, PAINTING
CONCESSION	ON & BAR, ASSISTANT STAGE MANAGER (BACKSTAGE),	PROMPTER, SET DESIGN,
COSTUMES,	S, SET CONTRUCTION, USHER, LIGHTING DESIGN, SOL	IND DESIGN, TECH BOOTH,
PLAY READII	ING COMMITTEE, TICKETING, PUBLIC RELATIONS, SO	CIAL MEDIA, HAIR & MAKE UP,
SET DRESSIN	ING, OTHER:	
Membership	ip dues: \$20 individual \$40 for family household. Total	l paid: \$
Paid by: ca	cash cheque credit card debit e-transfer <u>treasu</u>	rer@rivercityplayers.ca
Received by	v:	Date: