

Date: _____



Application for Membership

(Must be 18 years or older)

Name and Preferred Pronouns: _____

Home Address: _____

City, State, Zip Code: _____

Phone (best number to be reached): _____

Email Address: _____

Select the area(s) in which you would like to participate:

Please note: Training is available in many of these areas if you are interested but lack experience.

- | | | |
|---|---|---|
| <input type="checkbox"/> Acting | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Usher |
| <input type="checkbox"/> Singing | <input type="checkbox"/> Set Construction | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Sound |
| <input type="checkbox"/> Directing | <input type="checkbox"/> Props | <input type="checkbox"/> Make Up |
| <input type="checkbox"/> Music Director | <input type="checkbox"/> Selling Refreshments | <input type="checkbox"/> Website/Social Media |
| <input type="checkbox"/> Choreography | <input type="checkbox"/> Spotlight Operator | <input type="checkbox"/> Costume Construction |
| <input type="checkbox"/> Stage Management | <input type="checkbox"/> Lighting Board | <input type="checkbox"/> Copy Editing |
| <input type="checkbox"/> Costume Design | <input type="checkbox"/> Flys/Rail System | |
| <input type="checkbox"/> Set Design | <input type="checkbox"/> Art Work | |
| <input type="checkbox"/> Lighting Design | <input type="checkbox"/> Stage Crew | |

Select the Committee(s) you would like to participate:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Business | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Playbill | <input type="checkbox"/> Subscription Drive | <input type="checkbox"/> Scholarship |
| <input type="checkbox"/> Play Selection | <input type="checkbox"/> Tickets | |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Grants | |

SPONSORS*:

*Must be signed by (2) Little Theatre Members in Good Standing

1) _____ 2) _____

Please list previous theatrical experience* (or attach resume if available):

*Please Note: Previous theatrical experience is not mandatory for membership

ROLE	SHOW	COMPANY	YEAR
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Please list any technical experience (non-acting):

Special skills (e.g., scenic painting):

Please return this form to the Membership Chair or any LTFR Board member with payment. Payment can be made by check, money order, or Venmo (@littletheatreoffallriver).

Standard Membership*: \$35.00 includes one-year membership dues plus ticket discount

Student Membership: \$20.00 includes one-year membership dues plus ticket discount

***Included in this membership is one free ticket to Little Theatre's main stage production of the 2022-2023 season.**

If you have any questions, please email us at: LTFRMembership@gmail.com