



MILTON PLAYERS THEATRE GROUP  
MEMBERSHIP FORM



NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

MEMBERSHIP TYPE:

SINGLE \$25

FAMILY #30

STUDENT \$15

MEMBERSHIP PAID \_\_\_\_\_ DATE \_\_\_\_\_

Please indicate areas of interest to you:

- |   |   |
|---|---|
| <input type="checkbox"/> Acting                     | <input type="checkbox"/> Set Design       |
| <input type="checkbox"/> Directing                  | <input type="checkbox"/> Set Construction |
| <input type="checkbox"/> Producing                  | <input type="checkbox"/> Set Painting     |
| <input type="checkbox"/> Stage Management           | <input type="checkbox"/> Sound Design     |
| <input type="checkbox"/> Assistant Stage Management | <input type="checkbox"/> Sound Operation  |
| <input type="checkbox"/> Make-up                    | <input type="checkbox"/> Properties       |
| <input type="checkbox"/> Costumes                   | <input type="checkbox"/> Front of House   |
| <input type="checkbox"/> Lighting Design            | <input type="checkbox"/> Administration   |
| <input type="checkbox"/> Lighting Operation         | <input type="checkbox"/> Publicity        |