



ENCORE THEATRE Inc.

Reg. No. A0035812A

APPLICATION FOR MEMBERSHIP

I,
(Full name of applicant)

of
(Address)

Telephone: (H) (W)

desire to become a member of Encore Theatre Inc. (M)

In the event of my admission as a member, I agree to be bound by the Rules of the Association.

.....
Signature of Applicant

Date

E-mail address

Please tick type of Annual Subscription:

- Single (\$20)
- Family (\$35)
- Concession (\$10)
- Child under 18 (\$5)

AREAS OF INTEREST
(Please tick as many as you wish)

1. Acting
2. Backstage
3. Front of House / Catering
4. Set Construction
5. Sound
6. Lighting
7. Costume
8. Publicity
9. Directing
10. Music
11. Technical

List any skills which may be useful: