



MEMBERSHIP APPLICATION

Name: _____

Email Address: _____

Postal Address: _____

Telephone: (Home and/or cellphone): _____

I wish my membership details to remain confidential YES / NO

Membership is valid for 12 months from date of purchase.

On joining Elmwood Players, you become a member of Christchurch's proudest community theatre society. Benefits of membership are:

1. One free ticket for any Elmwood production.
2. \$2 discount on tickets for Elmwood Players productions for the duration of membership.

I am interested in the following (tick all that are applicable):

Acting		Set Construction		Properties	
Backstage		Set Painting		Production Manager	
Sound		Front of House		Directing	
Lighting		Stage Manager		Choreography	

The membership fee for 2019 is \$20.

Note: All members receive copies of the Elmwood Players newsletter.

On line Application: Deposit \$20 into the Elmwood Players bank (National Bank A/c # 06-0805-0007090-00), with your name as a reference, then complete this form and email to s_primrose@hotmail.com.

OR

I enclose my cheque for \$20 (Do not send cash in the mail).

Signed: _____

Date: _____

Elmwood Players P.O. Box 2585 Christchurch www.elmwood-players.org.nz