

PLAYERS DRAMATIC SOCIETY APPLICATION FOR MEMBERSHIP

Full Name:	Mr. Mrs. Ms. Miss		
Address: (Including Postcode)			
Tel No.:		Date of Birth:	

I wish to become a Member of Players Dramatic society and should be pleased if you would put forward my application to the next meeting of the Executive Committee.

Membership Category: Full: OAP: Registered Unemployed: (please tick)

Signed:

Date:

Proposed by: (Must be a member of the Society)

Please indicate in which areas you would like to take part, indicating any appropriate experience or whether you would like to learn a particular skill.

Activity	Please tick	Age Range											
		18/25		26/30		31/40		41/50		51/60		Over 60	
Acting		Please indicate experience:											
Directing		Please indicate experience:											
Prompt													
Stage Management													
Sound / Lighting													
Props													
Set construction / Decor													
Wardrobe													
Make-up													
Front of House/ Programmes/Teas		Welcoming patrons and collecting tickets, selling tea/coffee vouchers.											
Catering		Helping in the kitchen during plays and other events.											
Bar		Helping behind the bar during plays and other events.											
Cleaning		Cleaning the theatre during performance weeks and for other special events.											
Publicity		Helping to liaise with local press/radio. Distributing leaflets and posters.											
Building Maintenance		Improvements/Repairs/Decorating.											
Social		Devising and organising entertainments and other Social Events.											
Any other skills you have to offer													

Please return the completed form to our Membership Secretaries:
Mr. & Mrs. J Vale, 57 Radnormere Drive, Cheadle Hulme, Cheadle, Cheshire, SK8 5JS.

Approved on behalf of Executive Committee: (Signed/position) Date: