

PLAYERS YOUTH THEATRE (age 12-18)



MEMBERSHIP APPLICATION

Title		Full Name	
Address			
		Postcode	
Landline		Mobile	
E-mail		Date of birth	

Please tick those areas which you are interested in becoming involved with or learning.

ACTING		
PROMPT		<i>Required during rehearsals and play week</i>
STAGE MANAGEMENT		<i>Co-ordinating sound/lighting, backstage and actors during plays</i>
LIGHTING		<i>Setting and operating lighting for a play</i>
SOUND		<i>Recording and operating sound effects/music for a play</i>
PROPS		<i>Sourcing, organising and handling properties for a play</i>
HAIR & MAKE UP		<i>Required for later rehearsals and play week</i>
WARDROBE		<i>Gathering/preparing costumes; helping on performance nights</i>
FRONT OF HOUSE		<i>Welcoming patrons; handling out programmes</i>
REFRESHMENTS		<i>Selling tea/coffee vouchers; making/serving refreshments</i>
PUBLICITY		<i>Promoting the theatre and plays/Social media/Recruiting members</i>
WRITING		<i>For performance on stage/at socials</i>
YOUTH		<i>Willing to work with Players Youth (DBS check required)</i>

Please forward my application to the Executive Committee for consideration at the next meeting.

Applicant's signature: _____ Date of application: _____

Parent/Guardian's signature: _____

Parent/Guardian's name: _____

Please complete and e-mail to: burnetts14@outlook.com

Or post to: Debbie Burnett, 14 Rowan Drive, Cheadle Hulme, Cheadle, Cheshire. SK8 7DX

Approved on behalf of Executive Committee by (name):		
Signature:	Position:	Date:
PLAYERS THEATRE, ANFIELD ROAD, CHEADLE HULME, CHEADLE. SK8 5EX TEL: 0161 485 1441 www.playersdramatic.co.uk		