

**PLAYERS THEATRE MEMBERSHIP APPLICATION**

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| Title |  | Full Name |  |
| Address |  |
|  | Postcode |  |
| E-mail |  | Date of birth |  |
| Landline |  | Mobile |  |
| Membership Category (please tick): |
| Full (18-65) |  | Concessions (65+) |  | Unwaged |  |

**Please tick those areas which you are interested in becoming involved with or learning. If selecting ‘Acting’ and/or ‘Directing’ please indicate if you have any experience.**

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| ACTING(please tick age range) |  | Age Range | 18-25 |  | 26-30 |  | 31-40 |  |
| 41-50 |  | 51-60 |  | Over 60 |  |
| Experience? |
| DIRECTING |  | Experience? |
| PROMPT |  | *Required during rehearsals and play week* |
| STAGE MANAGEMENT |  | *Co-ordinating sound/lighting, backstage and actors during plays* |
| LIGHTING |  | *Setting and operating lighting for a play* |
| SOUND |  | *Recording and operating sound effects/music for a play* |
| PROPS |  | *Sourcing, organising and handling properties for a play* |
| SET CONSTRUCTION |  | *Helping to build the set for a play* |
| SET DÉCOR |  | *Helping with artwork; decorating and dressing the set* |
| HAIR & MAKE UP |  | *Required for later rehearsals and play week* |
| WARDROBE |  | *Gathering/preparing costumes; helping on performance nights* |
| BAR |  | *Helping behind the bar during play week and other events* |
| FRONT OF HOUSE |  | *Welcoming patrons; Box Office* |
| REFRESHMENTS |  | *Selling tea/coffee vouchers; making/serving refreshments* |
| BUILDING MAINTENANCE |  | *Improvement/repairs/decorating to the fabric of the building* |
| CLEANING |  | *Cleaning the theatre during play week and other events* |
| ADMIN |  | *Archiving/Membership/Friends of/Tickets/Season Ticket holders* |
| PUBLICITY |  | *Promoting the theatre and plays/Social media/Recruiting members* |
| SOCIAL |  | *Devising/organising/running social events and other entertainments* |
| YOUTH |  | *Willing to work with Players Youth (DBS check required)* |

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

Applicant’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_ If approved for membership, I agree that my contact details can be shared with those who run the various sections detailed above. I also agree that my photograph can be used in publicity material for Players on social media and the website, as well as in the Theatre. To opt out of photos being used, please tick here: 🞏

Please complete and e-mail to: info@playersdramatic.co.uk

Or post to: Players Theatre, Anfield Road, Cheadle Hulme, Cheadle, Cheshire. SK8 5EX

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| 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 |