

New Member Form

Name: _____

Address: _____

Phone (Home): _____ (Cell): _____ E-mail: _____

Other Civic Memberships: _____

Please Check the areas in which you're interested:

- | | | | |
|---|---|--------------------------------------|--|
| <input type="checkbox"/> Acting | <input type="checkbox"/> Directing | <input type="checkbox"/> Producing | <input type="checkbox"/> Scenic Design |
| <input type="checkbox"/> Stage Management | <input type="checkbox"/> Lighting | <input type="checkbox"/> Sound | <input type="checkbox"/> Props |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Run Crew | <input type="checkbox"/> Makeup/Hair | <input type="checkbox"/> Costume |
| <input type="checkbox"/> Box Office | <input type="checkbox"/> House/Ushering | <input type="checkbox"/> Publicity | <input type="checkbox"/> Program |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Playreading | <input type="checkbox"/> Other (Specify) |

Previous Theatrical Experience: _____

Do you play a Musical Instrument? Yes No If Yes, What? _____

Do you sing? Yes No If Yes, Range? _____

Do you dance? Yes No If Yes, Style? _____

Other talents/hobbies/interests: _____

“So, good night
unto you all. Give
me your hands, if
we be friends...”

– Wm. Shakespeare
*A Midsummer Night's
Dream*

Catch The Spirit...

Fulton Community Theatre is actively producing shows, developing talent, and bringing pleasure to its audiences, members, and the Greater Fulton Community. Membership is open to all interested persons, and you are invited to join us and join in on the fun! For information, please contact the Theatre at P.O. Box 547, Fulton, NY 13069

**Fulton
Community
Theatre**

**PO Box 547
Fulton, NY 13069**