

PLAYERS THEATRE MEMBERSHIP APPLICATION



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.

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						
HAIR & MAKE UP		Required for later rehearsals and play week						
WARDROBE		Gathering/preparing costumes; helping on performance nights						
SET CONSTRUCTION		Helping to build the set for a play						
SET DÉCOR		Helping with artwork; decorating and dressing the set						
BAR		Helping behind the bar during play week and other events						
CATERING		Helping in the kitchen 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						
WRITING		For performance on stage/at socials						
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: _____

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		