

Llano Community Theatre

P O Box 282

Llano, Texas 78643

Membership Form

effective through / 2017

Thank you for your interest in becoming a member of Llano Community Theatre. We need your help to support quality, live theatrical entertainment in our community. You must be a member to vote in the theatre elections and decisions. Please check the appropriate membership level and complete the following information:

Individual \$15 _____ Family \$25 _____

Name (Person or Business): _____

Address: _____ E-mail: _____

City, State, ZIP: _____

Home Phone: _____ Work Phone: _____ Other: _____

Please let us know if there are any areas of interest in which you would like to volunteer:

<input type="checkbox"/> Acting	<input type="checkbox"/> Props	<input type="checkbox"/> Membership
<input type="checkbox"/> Sets	<input type="checkbox"/> Technical	<input type="checkbox"/> Publicity
<input type="checkbox"/> Costumes	<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Hospitality

What plays would you like to see LCT produce in the future?

Please give this form along with your check to a board member – or - mail it to the address above.

Thank you again for becoming part of Llano Community Theatre!

Sincerely,

Llano Community Theatre
Board Members