



Membership Application

THANK YOU FOR YOUR INTEREST IN AND SUPPORT OF OUR THEATRE COMPANY!

We are excited that you want to be a member of our company! As such, you are an integral part of our PSP family. Among other benefits, your annual tax-deductible contribution of \$15 or more allows us to invest in building improvements, to cover production costs, and to continue offering insurance protection to our production volunteers participating in PSP sponsored activities. Additional membership benefits include:

- Receive regular mailings including special events announcements, audition notices, crew solicitations, and a subscription to our own callboard newsletter.
- Get "first dibs" on buying tickets for any show.
- Receive a discount on regular ticket prices for any PSP show you attend.
- Be able to attend PSP Board of Directors meetings with eligibility to nominate officers, vote, and run for office.

DUES ARE PAID YEARLY AND COST \$15/INDIVIDUAL • \$10/STUDENT & SENIORS • \$25/FAMILY

I would like a PSP membership for:

___ *Myself only (Adult). Here is my check for \$* _____ .

___ *My family. Here is my check for \$* _____ . *Provide family member names* below.*

___ *I would like to offer an additional contribution to PSP in the amount of \$* _____ .

NAME: _____

*FAMILY MEMBERS: _____

ADDRESS: _____

DAY PHONE: _____ EVE PHONE: _____ OTHER: _____

EMAIL: _____

SIGNATURE: _____ DATE: _____

PARENT SIGNATURE (REQUIRED FOR MINOR): _____

Make checks payable to Pacifica Spindrift Players. If you have questions or concerns, please contact our administrative office (650-738-1788) during office hours (Tues/Thurs 2:30 to 4:30pm).

WOULD YOU LIKE TO VOLUNTEER YOUR TIME AT THE THEATRE? ___ YES ___ NO

IF YES, IN WHICH AREAS WOULD YOU LIKE TO HELP? [CIRCLE, EXPERIENCE NOT ALWAYS NECESSARY]
ACTING / DIRECTING / LIGHTING / SOUND / SET / BOX OFFICE / USHER / HOSPITALITY / PUBLICITY

*Send with check or money order to
Pacifica Spindrift Players
Membership
P.O. Box 1176
Pacifica, CA 94044-6176*