

# ECHO PLAYERS SOCIETY

110 West 2<sup>nd</sup> Avenue, Box 281,  
Qualicum Beach, BC  
V9K 1S8

Telephone: 250-752-3522  
Email: [info@echoplayers.ca](mailto:info@echoplayers.ca)  
Website: [www.echoplayers.ca](http://www.echoplayers.ca)

## MEMBERSHIP APPLICATION FORM

Date: \_\_\_\_\_

NAME #1 \_\_\_\_\_ E-MAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

Adult Member                       Student Member                       Senior (80+) Member

I am interested in helping in the following areas (please check any that apply):

- |                                  |                                      |   |  |  |  |
|----------------------------------|--------------------------------------|---|--|--|--|
| <input type="checkbox"/> Act     | <input type="checkbox"/> Publicity   | <input type="checkbox"/> StageMgr       | <input type="checkbox"/> Costume Des   | <input type="checkbox"/> SetDesign       | <input type="checkbox"/> Light Design  |
| <input type="checkbox"/> Sing    | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Stage Hand     | <input type="checkbox"/> Costume Sew   | <input type="checkbox"/> SetConstr       | <input type="checkbox"/> Light Operate |
| <input type="checkbox"/> Dance   | <input type="checkbox"/> Library     | <input type="checkbox"/> Props          | <input type="checkbox"/> Make-Up       | <input type="checkbox"/> Paint Basic     | <input type="checkbox"/> Sound Design  |
| <input type="checkbox"/> Direct  | <input type="checkbox"/> BoxOffice   | <input type="checkbox"/> Set Furnishing | <input type="checkbox"/> Hair Dressing | <input type="checkbox"/> Paint Scenic    | <input type="checkbox"/> Sound Operate |
| <input type="checkbox"/> Produce | <input type="checkbox"/> Social      | <input type="checkbox"/> FOH            | <input type="checkbox"/> Bar           | <input type="checkbox"/> Poster Distrib. |  |
| <input type="checkbox"/> Board   | <input type="checkbox"/> Dresser     | <input type="checkbox"/> Playreading    |  |  |  |
- 

NAME #2 \_\_\_\_\_ E-MAIL \_\_\_\_\_

Adult Member                       Student Member

I am interested in helping in the following areas (please check any that apply):

- |                                  |                                      |   |  |  |  |
|----------------------------------|--------------------------------------|---|--|--|--|
| <input type="checkbox"/> Act     | <input type="checkbox"/> Publicity   | <input type="checkbox"/> StageMgr       | <input type="checkbox"/> Costume Des   | <input type="checkbox"/> SetDesign       | <input type="checkbox"/> Light Design  |
| <input type="checkbox"/> Sing    | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Stage Hand     | <input type="checkbox"/> Costume Sew   | <input type="checkbox"/> SetConstr       | <input type="checkbox"/> Light Operate |
| <input type="checkbox"/> Dance   | <input type="checkbox"/> Library     | <input type="checkbox"/> Props          | <input type="checkbox"/> Make-Up       | <input type="checkbox"/> Paint Basic     | <input type="checkbox"/> Sound Design  |
| <input type="checkbox"/> Direct  | <input type="checkbox"/> BoxOffice   | <input type="checkbox"/> Set Furnishing | <input type="checkbox"/> Hair Dressing | <input type="checkbox"/> Paint Scenic    | <input type="checkbox"/> Sound Operate |
| <input type="checkbox"/> Produce | <input type="checkbox"/> Social      | <input type="checkbox"/> FOH            | <input type="checkbox"/> Bar           | <input type="checkbox"/> Poster Distrib. |  |
| <input type="checkbox"/> Board   | <input type="checkbox"/> Dresser     | <input type="checkbox"/> Playreading    |  |  |  |
- 

Membership fees are \$15.00 for adults/\$10 for Over 80s/ \$7.50 for students/\$35 for family(3 or more) at one address. Please send your cheque for the required amount with this form to the address above.

*Please note that members over 80 are not covered by ECHO Insurance and participate in theatre activities at their own risk.*

If, for reasons of Privacy, you do not wish your name included in our phone out or mailing list please check here

Date Processed \_\_\_\_\_ Initials: \_\_\_\_\_

6/10/2018