


Membership Application / Renewal Form 2024

NAME:	New Member <input type="checkbox"/> Renewal <input type="checkbox"/>
MAILING ADDRESS:	Notifications: <input type="checkbox"/> by Email <input type="checkbox"/> by Phone
PHONE #:	
CELL #:	
EMAIL:	

As a member of Theatre Morin Heights, you will have the opportunity to fully participate in all activities. As a non-profit, volunteer, community organization, Theatre Morin Heights is dependent on the invaluable time and efforts of its membership in continuing to be successful. All members are encouraged to help us towards the organization's goal of providing quality theatre experiences.

I am interested in volunteering:

Acting on Stage

Behind Scenes Production:

(Script Assistant, Set Design, Set Construction, Painting, Lighting/Sound Design, Décor, Costume Design, Sewing, etc.)

Play Reading (Participate or Attend)

Other/Comments: