

Sauk Prairie Theatre Guild Membership Form

Name: _____

Address: _____

City/State/Zip: _____

Email Address: _____

Phone: _____

Membership Level:

- _____ Student (\$5/per student)
- _____ Individual (\$10/individual)
- _____ Family (\$25 Family), please share your family's names with us: _____
- _____
- _____

In addition, we're interested in volunteering! Here's what we're interested in:

- _____ Building Stuff _____ Sewing Stuff
- _____ Acting _____ Directing
- _____ Reigning in Chaos (well, ok, working backstage mostly)
- _____ Planning (this is planning during the year for more than one production)
- _____ Board of Directors _____ I'll work with funnel cakes!

Checks should be made out to:

Sauk Prairie Theatre Guild or SP Theatre Guild

The Form and Check should be mailed to:

PO Box 112

Prairie du Sac, WI 53578