



**Kanata Theatre**

## **Membership Form**

Please fill out the form below and email it to our member coordinator at  
[memberform@kanatatheatre.ca](mailto:memberform@kanatatheatre.ca)

First name

Last name

Address

City

Postal Code

Email

Evening telephone

### **Membership Type**

Individual Membership (\$10)

Individual 5 year (\$40)

Student Membership (\$5)

Family Membership (\$20)

Family 5 year (\$80)

Family's Names

### **I'm interested in:**

Acting:

Box Office:

Costumes:

Directing:

Front of House:

Hair/Make-up:

Lights:

Producing:

Set Construction:

Props:

Set Design:

Set Painting:

Sound:

Stage Managing:

Other:

Not interested in working on shows: