

The CenterStage Players, Inc.

MEMBERSHIP FORM – 2019-2020

All prospective members of The CenterStage Players, Inc. are required to complete this registration form.
(ONE FORM PER HOUSEHOLD) Membership runs from June 1st, 2019 - May 31st, 2020.

SECTION 1: MEMBER CONTACT INFORMATION

NAME(S) or PARENT			
YOUTH PERFORMER NAME(S) (if applicable)			
ADDRESS 1			
ADDRESS 2		PRIMARY PHONE	
CITY, ST ZIP		SECONDARY PHONE	
EMERGENCY CONTACT		PRIMARY EMAIL	
EMERGENCY PHONE		SECONDARY EMAIL	

SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
ADULT	Full Regular Membership	\$15	
PARENT/GUARDIAN	Sponsor of Youth Performer(s) Under 18	\$15 per youth (max \$30)	
PAYMENT METHOD	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card (in person only) <input type="checkbox"/> Cash <input type="checkbox"/> Online Payment (PayPal to: csplayers@fuse.net)	Maximum of \$30 for any family combination of parents/guardians and/or youth performers in same household	

SECTION 3: MEMBER INFORMATION

OCCUPATION/JOB TITLE:			
Please indicate if you would be willing to serve on an organizational committee: <input type="checkbox"/> Yes <input type="checkbox"/> Not at this time If there is a specific area or skill that interests you, please specify: _____			
Permission to use photographic images: Photographs of CenterStage Players members may be used in various CenterStage Players communications including the newsletter and website. Group photographs taken at CenterStage Players events may be used without identifying individual members. For individual photographs, please indicate your permission for use (CHOOSE ONE): _____ CenterStage Players has my permission to use and identify photographs of me (or my child). _____ CenterStage Players does not have permission to use and identify photographs of me (or my child). _____ CenterStage Players should contact me before using any identified photographs of me (or my child).			

Date: _____ **Signature (or Parent/Guardian):** _____

It is understood that signing this MEMBERSHIP FORM releases The CenterStage Players, Inc., their officials, officers and staff, from any liability or responsibility in connection with any loss or injury that you (and/or your minor children) might incur as a participant while engaged in CenterStage Players' productions or other events. Furthermore you will agree to reimburse CenterStage Players for any financial loss incurred directly resulting from your (or your minor children's) activities or lack thereof—including (but not limited to) loaned tickets, scripts, costumes, props, etc. that are lost, damaged or destroyed.

PLEASE SEND THIS MEMBERSHIP APPLICATION (attach to e-mail if paying online) AND A CHECK MADE PAYABLE TO "THE CENTERSTAGE PLAYERS, Inc." TO:

Fred Hunt – 3710 Philnoll Drive – Cincinnati, OH 45247 Email: csplayers@fuse.net

(Receipt – DO NOT DETACH – Must be Completed and signed by the CenterStage Players, Inc. Treasurer)

Amount Paid: _____ Method: _____ Membership Year: June 1, 2019 – May 31, 2020

Member Name: _____ Treasurer, The CenterStage Players, Inc. _____