

Membership application form

(OFFICE USE ONLY)

New application:

Renewal:

Chkd:

Date:

Adult **£16:**

Couple **£25:**

Family **£35:**

Junior **£6:**

Student **£6:**

Donation: **£**

Subscriptions apply to the period from January to December

Couples: 2 adults at the same address (please list all below)

Family: membership for 2 adults and under 16s at the same address (please list all below)

Juniors: under 16s at start of the year of membership

Students: full-time, over 16 (evidence may be required)

Are you interested in taking an active part in the theatre?

Please tick below any activities that may interest you

(no experience necessary!)

Title	First name	Last name	Date of Birth (if under 16)	Acting	Directing	Backstage	Wardrobe	Lighting	Sound	Props	Set Building	Box Office	Front of House	Coffee/Ice Cream	Bar	Publicity	Admin	Office use only

Your contact details for *Spotlights* magazine delivery etc.

PLEASE enclose a cheque and a stamped, self-addressed envelope

Name: _____ *(NB: we cannot accept cash)*

Address: _____ Post Code: _____

Tel: _____ Mobile: _____ Date: _____

Email: _____ Cheque enclosed for: **£** _____

Please send your cheque (made payable to Bromley Little Theatre) and SAE to: **Membership, Bromley Little Theatre, North Street, Bromley BR1 1SB**