



Application to Join The Last Resort Players

Name: _____

Address: _____

_____ Phone# _____

Email: _____

Parent or Guardian (for Junior Members) _____

Volunteer Interests (Check as many as you wish)

Administrative ___ Directing ___ Sound Tech ___ Set Handling ___

Advertising ___ Singing ___ Performing ___ Set Design ___

Costume ___ Lighting ___ Props ___ Set Construction ___

Dancing ___ Publicity ___ Producing ___ Makeup ___ Other _____

Background _____

Annual Dues (January 1 to December 31)

Individual \$20.00 ___ Family \$30.00 ___ Associate Member ___
Junior Member ___ (Individual and Family categories are Voting Memberships)

Complete and mail application form with membership dues (if applicable) to:

The Last Resort Players
PO Box 2104
Florence, OR 97439