



Curtain Club Theatre

Your Community Theatre

Membership Form

New Member Today's Date _____
 Returning Member _____

Name _____

Address _____

City _____

Province _____

Postal Code _____

Email Address _____

Primary Phone _____

Other Phone _____

- I am under 19 years old
- I qualify as a Young Volunteer* (15 to 24 years old)
* Ontario Youth Volunteer Service Award
- I have completed the **Smart Serve** Responsible Alcohol Beverage Service Training Program

My Smart Serve Number _____



In the event of an emergency please supply the following
Emergency Contact Person _____

Emergency Contact Phone _____

Email to: membership@thecurtainclub.org

Mail to: THE CURTAIN CLUB Attention Membership
400 Newkirk Road, Richmond Hill, ON L4C 3G7

Volunteer Opportunities

The Curtain Club provides all of our volunteers with the opportunity to learn and develop skills in a variety of areas. Please check off all areas below that apply. We look forward to your active membership in the Curtain Club!

I have experience and will do

I would like to learn

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Actor |
| <input type="checkbox"/> | <input type="checkbox"/> | Producer |
| <input type="checkbox"/> | <input type="checkbox"/> | Director |
| <input type="checkbox"/> | <input type="checkbox"/> | Stage Manager |
| <input type="checkbox"/> | <input type="checkbox"/> | Assistant Stage Manager |
| <input type="checkbox"/> | <input type="checkbox"/> | Set Designer |
| <input type="checkbox"/> | <input type="checkbox"/> | Set Construction |
| <input type="checkbox"/> | <input type="checkbox"/> | Set Painter |
| <input type="checkbox"/> | <input type="checkbox"/> | Scenic Painter |
| <input type="checkbox"/> | <input type="checkbox"/> | Set Décor, Furnishing, Dressing |
| <input type="checkbox"/> | <input type="checkbox"/> | Lighting Designer |
| <input type="checkbox"/> | <input type="checkbox"/> | Lighting Operator |
| <input type="checkbox"/> | <input type="checkbox"/> | Lighting Crew (<i>Hanging, focusing, etc.</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Costume Designer |
| <input type="checkbox"/> | <input type="checkbox"/> | Sewing |
| <input type="checkbox"/> | <input type="checkbox"/> | Sound Designer |
| <input type="checkbox"/> | <input type="checkbox"/> | Sound Operator |
| <input type="checkbox"/> | <input type="checkbox"/> | Properties Coordinator |
| <input type="checkbox"/> | <input type="checkbox"/> | Properties Assistant |
| <input type="checkbox"/> | <input type="checkbox"/> | Properties Builder |
| <input type="checkbox"/> | <input type="checkbox"/> | Hairstyling |
| <input type="checkbox"/> | <input type="checkbox"/> | Makeup |
| <input type="checkbox"/> | <input type="checkbox"/> | Publicity |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Relations Assistant |
| <input type="checkbox"/> | <input type="checkbox"/> | Photography |
| <input type="checkbox"/> | <input type="checkbox"/> | Poster Design |
| <input type="checkbox"/> | <input type="checkbox"/> | Coffee/Bar (<i>Must be Smart Serve certified</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | House |
| <input type="checkbox"/> | <input type="checkbox"/> | Serving on the Executive Committee |
| <input type="checkbox"/> | <input type="checkbox"/> | Serving as an Appointee |
| <input type="checkbox"/> | <input type="checkbox"/> | Serving on a Club Committee |
| <input type="checkbox"/> | <input type="checkbox"/> | Box Office Assistant at the Theatre |
| <input type="checkbox"/> | <input type="checkbox"/> | 50/50 Raffle (<i>must be 19</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Bingo Volunteer (<i>must be 19</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Other: <i>Please specify</i> |

Photograph/Video Consent and Release Authorization

I give permission to The Curtain Club, and/or parties designated by The Curtain Club to photograph/video me and use such photograph(s)/video(s) in all forms of media. I further grant the right to reproduce, use, exhibit, display, broadcast or distribute said media for any and all promotional purposes. I further consent to the use of my name in connection with the photograph(s)/video(s) if needed by The Curtain Club and/or parties designated by The Curtain Club.

I understand and agree that I will not receive any payment for my time or expenses or any royalty for the publication of the photograph(s)/video(s) or the use of my name and I hereby release The Curtain Club and/or any parties designated by The Curtain Club from any such claims. I certify that I have read and fully understand this consent and release, and that all questions pertaining to this consent have been answered to my satisfaction.

Signature of Member (if 18 years or older)

If member is under 18

It is okay to use my child's photograph(s)/video(s), etc. as described above.

Signature of Parent/Guardian (if under age 18)