



P.O. Box 301 Chelsea, MI 48118

## Chelsea Area Players Membership Application

Name of Member \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

I would like to join and support the **Chelsea Area Players** community theater group.

Check one:

This membership is for  1 person  2 or more persons  Business / Organization

Choose a Standard membership or a Special Membership to help even more:

### Standard Memberships

\_\_\_\_ Family \$35.00

\_\_\_\_ Couple \$30.00

\_\_\_\_ Individual \$20.00

\_\_\_\_ Senior/Student \$10.00

### Special Memberships

\_\_\_\_ Friend \$36.00+

\_\_\_\_ Cast Member/Org \$50.00+

\_\_\_\_ Featured Player \$75.00+

\_\_\_\_ Star \$100.00+

\_\_\_\_ Director \$200.00+

\_\_\_\_ Producer \$500.00+

\_\_\_\_ Angel \$1,000.00+

Amount Enclosed \$ \_\_\_\_\_

Date \_\_\_\_\_

Please mail your tax-deductible membership contribution payable to Chelsea Area Players to our address. Circle any areas where you have interests or might be willing to help with a committee or a production.

**Play Reading Costumes Set Building / Painting Props Music Technology /Website  
Choreography Outreach Youth Theater Directing Producing Sound/Lights**

Please write any additional comments here and on the back. **Thank You!**

Visit the CAP website for current events and activities.

**[www.ChelseaAreaPlayers.org](http://www.ChelseaAreaPlayers.org)**