



Booker T. Washington HSPVA Theater Guild

“Play a Role, Get Involved!”

Membership Form: ‘09 - ‘10

Please print clearly.

Student Name: _____ Grade: _____

Parent Name(s): M F

Address: _____ City _____ Zipcode: _____

| Hm.#: | Cell Phone Numbers | E-mail Address |
|---------|--------------------|----------------|
| Student | | |
| Mother | | |
| Father | | |

| Membership Benefit | Membership Level | | | | | |
|--------------------------------------|------------------|-------|--------|--------|-----------|------------|
| | Student | Basic | Bronze | Silver | Gold | Platinum |
| Student Membership | • | • | • | • | • | • |
| 1 Guild Vote | • | • | • | • | • | • |
| Playbill Recognition | | | • | • | • | • |
| ¼ pg. Playbill Ad (Fall & Spring) | | | | • | n/a | n/a |
| ½ pg. Playbill Ad (Fall & Spring) | | | | | • | n/a |
| Guild T-Shirt | | | | | • | • |
| Full pg. Playbill Ad (All Playbills) | | | | | | • |
| 4 Admissions to all Theater Shows | | | | | | • |
| Membership Fee | \$5 | \$10 | \$50 | \$125 | \$250-499 | \$500 or > |

Student Basic Bronze Silver Gold \$ _____ Platinum \$ _____

Mail Membership Form and check to:

BTWHSPVA Theater Guild c/o Fonda Arbetter 4140 Rainsong Dr., Dallas, TX 75287

For more information e-mail: jaynfonda@aol.com

Mission Statement

The Theatre Guild supports the students and faculty of Booker T. Washington High School for the Performing and Visual Art's Theatre Department in its various activities and helps them achieve their goals and aspirations.

All Guild members will receive periodic e-mail communications and are encouraged to attend monthly Guild meetings.

Are you interested in learning more about the volunteer program? Yes _____ No _____

Paid \$ _____ Check No. _____ Cash _____ Date _____ Received By _____