



# HSRT THEATRE GUILD MEMBERSHIP FORM

Office Use:
Date Received: _____
Received By: _____

Name(s): \_\_\_\_\_

Additional Name(s): \_\_\_\_\_  
(You may use one membership form for multiple family members. Please include their names on the lines provided)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I am interested in:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Ushering (Complete reverse side) | <input type="checkbox"/> Transportation | <input type="checkbox"/> Food for Starving Artists          |
| <input type="checkbox"/> Adopt - A - Cottage Host         | <input type="checkbox"/> Strike Night   | <input type="checkbox"/> Cleaning Crew                      |
| <input type="checkbox"/> Social Networking                | <input type="checkbox"/> Young Guild    | <input type="checkbox"/> Hearing Assist/Loop System Support |

I am interested in applying for a committee chair position for \_\_\_\_\_  
(We will contact you to set-up an interview.) (Indicate area you'd like to chair)

**YES I WANT TO JOIN THE THEATRE GUILD:**

(All membership fees are tax deductible as a charitable contribution)

- |                                 |                              |            |
|---------------------------------|------------------------------|------------|
| <b>Basic Membership:</b>        | # _____ x \$10.00 per person | = \$ _____ |
| <b>Friends Membership:*</b>     | # _____ x \$25.00 per person | = \$ _____ |
| <b>Supporting Membership:*</b>  | # _____ x \$50.00 per person | = \$ _____ |
| <b>Social Membership:*</b>      | # _____ x \$75.00 per person | = \$ _____ |
| <b>Young Guild Membership:*</b> | # _____ x \$25.00 per person | = \$ _____ |
| <small>(Ages 12 - 17)</small>   |                              |            |
| <b>Sustaining Membership:</b>   | # _____ x \$ _____           | = \$ _____ |

Total Due: \_\_\_\_\_

*\*This level includes a season T-shirt please indicate the size(s) for each person joining at these levels:*

# \_\_\_\_\_ Small # \_\_\_\_\_ Medium # \_\_\_\_\_ Large # \_\_\_\_\_ X-Large # \_\_\_\_\_ 2X-Large # \_\_\_\_\_ 3X-Large

**Payment Type:**

Check (Made payable to Hope College)

Credit Card Circle: Visa MasterCard American Express Discover



# \_\_\_\_\_ Exp: \_\_\_\_\_ CVV \_\_\_\_\_

**Please return form with payment to:**  
**HSRT Theatre Guild • PO BOX 9000 • Holland, MI 49422-9000**  
**Questions?: Phone: 616-395-7600 • Email: hsrt@hope.edu**

# USHER DATE SIGN-UP

If you are unable to attend the on site meeting and sign-up, please return your membership form with payment and indicate the dates and times you are interested in ushering in the order of preference. We will do our best to assign you the dates you request. *We will assign dates based on the date your membership form is returned.* **We will do on site sign-up prior to assigning dates for mailed in requests.**

- All ushers must be members of the Hope Theatre Guild at some level.
- Children ages 12 - 17 who wish to usher must be accompanied by an adult who is also ushering.
- All members wishing to usher will need to attend a 60 to 90 minute orientation/training prior to the beginning of the season.
- You may sign-up for one performance for each title and for one alternate spot per title.

There are ten (10) ushers and four (4) alternates for each of the mainstage productions.

NEW: We will also need four (4) ushers and two (2) alternates for our CPT production of *School House Rock Live!* which will be at the Knickerbocker Theatre .

There are evening, morning and afternoon performances.

We would like to usher with: \_\_\_\_\_

(Indicate name of others you'd like to be assigned with)

Comments:

## ***Working - Usher***

Knickerbocker Theatre

1. Date \_\_\_\_\_ Time \_\_\_\_\_  
2. Date \_\_\_\_\_ Time \_\_\_\_\_  
3. Date \_\_\_\_\_ Time \_\_\_\_\_  
4. Date \_\_\_\_\_ Time \_\_\_\_\_

## ***Annie - Usher***

DeWitt Theatre

1. Date \_\_\_\_\_ Time \_\_\_\_\_  
2. Date \_\_\_\_\_ Time \_\_\_\_\_  
3. Date \_\_\_\_\_ Time \_\_\_\_\_  
4. Date \_\_\_\_\_ Time \_\_\_\_\_

## ***Driving Miss Daisy - Usher***

DeWitt Theatre

1. Date \_\_\_\_\_ Time \_\_\_\_\_  
2. Date \_\_\_\_\_ Time \_\_\_\_\_  
3. Date \_\_\_\_\_ Time \_\_\_\_\_  
4. Date \_\_\_\_\_ Time \_\_\_\_\_

## ***A View from the Bridge - Usher***

DeWitt Theatre

1. Date \_\_\_\_\_ Time \_\_\_\_\_  
2. Date \_\_\_\_\_ Time \_\_\_\_\_  
3. Date \_\_\_\_\_ Time \_\_\_\_\_  
4. Date \_\_\_\_\_ Time \_\_\_\_\_

## ***School House Rock Live! - Usher***

Knickerbocker Theatre

1. Date \_\_\_\_\_ Time \_\_\_\_\_  
2. Date \_\_\_\_\_ Time \_\_\_\_\_  
3. Date \_\_\_\_\_ Time \_\_\_\_\_  
4. Date \_\_\_\_\_ Time \_\_\_\_\_

You will receive confirmation of your dates via mail and email the week following sign-ups.