



Marshfield Performing Arts Society, Inc.  
DBA Marshfield Community Theatre (MCT)  
2020 Membership Application  
P.O. Box 344, Marshfield, MO 65706

Yes, I want to join the Marshfield Performing Arts Society, Inc. DBA Marshfield Community Theatre (MCT) for 2020. I understand my membership runs from Jan. 1 – Dec. 31, 2020. I understand that I may join any time during the year, but the membership dues will not be prorated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please mark the following and make checks payable to: Marshfield Community Theatre or MCT

Adult Membership (\$10)     Student Membership (\$5)     Family Membership (\$25)

### Member Information

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Email

### Interests & involvement

My interests for MCT productions are (check all that apply):

On stage     Back stage     Support (construction, costumes, tickets, publicity, etc.)

My interests serving on a committee(s) are (check all that apply):

Production Planning     Education     Communications

**If you are filling out a family membership, please see the next page.**

## Please complete the following for family memberships

Additional Member Name

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Name

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Phone

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Address

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City, State, Zip

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Email

Additional Member Name

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Name

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Phone

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Address

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City, State, Zip

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Email

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Name

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Phone

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Address

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