



Sun City Players Community Theater Membership Form

Annual Dues: \$10

(Mark with X) New Member? Membership Renewal? Dues Year: 20____?

RCSC Card # _____ Year joined _____

Last Name: _____ First: _____ Nickname: _____

Address: _____ Sun City AZ Zip: _____

Phone (Cell): _____ Phone (Home): _____

Email _____ Birthday: MM/DD: _____

WE NEED YOUR TALENTS! Please mark your fields of interest X or I (Instructor) for those you may be willing to teach.

On Stage		Behind the Scene		Advertising	
Actor		Director		Artwork	
Announcer (MC)		Production Manager		Ad Sales	
Dancer		Stage Manager		Publications	
Singer		Props		Publicity	
Musician		Costumer		Other	
Sets		Dresser		Usher	
Set Design		Make-up		Ticket Sales	
Set Build Crew		Hair Styling		Membership	
Lighting				Computer Skills	
Sound				Office Skills	
				Web Design	

Comments and Questions: _____

Dues are \$10.00 per person. Make checks payable to Sun City Players Community Theater.

Bring completed form to a Monday Meeting any 3rd Monday of the month Sept-May.

Or mail to SCPCT 9749 N 107th Ave, Sun City, AZ 85351

Date Paid: ____/____/____ Amount:\$_____ Cash ____ Check # _____