



Membership Form



Your membership card entitles you to a \$2 discount on all Hilliard Arts Council productions and 25% off all other Hilliard Arts Council offerings. And remember, your membership fees are tax deductible up to the value of goods and discounts received.

Type of Membership: *(please circle)*

Lifetime (\$200/person)

Family (\$50)

Individual (\$25)

Members' Names: *(please print)*

Member Name _____

Spouse Name _____

Children _____

(Please list all parents and children for a family membership.)

Street Address _____

City _____ **Zip** _____

Home Phone _____ **Cell Phone (opt)** _____

Work Phone (opt) _____ **Email** _____

Areas of Interest: *(please circle all applicable)*

Music

Visual Art

Dance

Theater

Writing

Photography

Activities in Which Any of You Would Like to Participate: *(please circle all applicable)*

The Messiah Chorus

Acting

Theater Technicals

Summer/Winter Concerts

Theatrical Singing

Children's Events

Arts & Crafts Festivals

Theatrical Costuming

Parties/Receptions

Christmas Festivals

Theater Dance

Box Office

Visual Arts Exhibits

Theater Orchestra

Publicity/Newsletter