LINCOLN Hills Players Membership Application

Name (Please print)		-	
Address			
Phone #1		Phone #2	
E-Mail:			
Amount Enclosed:	Date:	Birthdate (month/day)	
Make checks payaMonthly club meetAnnual Membershi	ble to Lincoln Hills P lings are the 2 nd Mor ip Dues (January 1 –	- December 31) are \$5.00 layers; cash is okay nday at 4 pm in Kilaga Springs Presentation Hall December 31) are \$5.00 ship Coordinator below	
Send this form and check t	:0:		
	2358 Granite Lan Lincoln, CA 9564	Membership Coordinator ne	
Please list theater or produ	uction experience:		
Please let us know your ar	eas of interest (chec	ck all that apply):	
☐ Sound/Audio/Lighting		☐ Directing	
☐ Costumes		☐ Acting	
☐ Stage Crew/Sets		☐ Producing	
☐ Publicity		Other	