

Twin Lakes Playhouse Twinlakesplayhouse.org

P.O. Box 482

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| Addmaga | Today's Date | | | | | |
|--|--|--|---|--|--|--|
| Address: | (| City, State, Zip: | | | | |
| Email: | 1 | Age: Child | Teen Young A | Adult Adult Older Adult | | |
| Contact Numbers: Hom | ne | Cell | | Other | | |
| Newcomer to the theatre? | Newcomer to this area? | | | | | |
| member to be involved in an regular monthly membership | my way with a play and sign meetings. Regular membersl P.M. on the 3 rd Monday of eathership Chairman or any me r October 1 st of current year | the Release a hip meetings a ach month. Ea mber of the B ar – are hono | nd Authorization so are held at the playlach member may re- coard of Directors. red through the en | | | |
| Playhouse for advertising and pr | on concerning me regarding any ublicity purposes only, concerni | the Twin Lake legitimate product | es Playhouse to release duction in which I m on in which I may be | ase any photographs and/or nay be involved for the Twin Lake e involved, including but limited t | | |
| damages, which may result from Signature | | Printe | d Name | kes Playhouse from any liability o to Volunteer) | | |
| Signature Playhouse A | n such publication. | Printe our interest | d Name and willingness | | | |
| damages, which may result from Signature | n such publication ctivities: (Please indicate y | Printe our interest | d Name and willingness | to Volunteer) | | |