



Membership Application 2019/2020

New / Renewal

Name _____

Address _____

City _____

Province _____

Postal Code _____

Phone _____

E-Mail _____

Membership Fees

- Single \$25.00
- Family \$50.00 (2 adults + all children in household under18)
- Student \$15.00 (full time student: high school/college/university)
- Single Adult Package \$100.00** (receives all current benefits PLUS 1 ticket to each show of the season for their Opening Weekend PLUS 2 bar tickets for each show)
- Family Package (2 adults + all children in household under18) \$150.00** (receives all current benefits PLUS 2 tickets to each show of the season for their Opening Weekend)

MAKE CHEQUE PAYABLE TO: HAMILTON THEATRE INC.

VISA / MasterCard

Name on Card _____

Exp. Date _____

/ CVV # _____

Signature _____

Cash or Interac payments may be made at the Box Office

I understand that I may not commence rehearsals for any production until I have become a paid member of Hamilton Theatre Inc. It is understood and agreed by me that Hamilton Theatre Inc. is not to be held responsible for any injury, loss, or damage which may be suffered or incurred by me while engaged in any of its activities, and I hereby release Hamilton Theatre Inc. from any liability whatsoever. All memberships expire annually on September 1st, unless membership is renewed.

Signed: _____