



MARIEMONT PLAYERS, INC.

Membership Application

Anyone wishing to participate in any capacity with MPI must become a member. Paid membership entitles you to participation in the Players' Group Liability Insurance, voting privileges (members 18 & older), the monthly newsletter, and participation in all member social activities. Membership dues expire at the end of the each current fiscal year (June 30th). Membership dues paid after April 30th (during the May show), will be extended through the end of the next fiscal year (June 30th). *Questions?* Email: jj2444@fuse.net.

Name: _____

Address: _____

City/ST/Zip: _____ Email: _____

Phone: Daytime: _____ Home: _____ Cell: _____

Family Members: _____

Please check appropriate boxes:

Individual: \$15 - New membership \$10 - Renewal membership

Family: \$30 - New membership \$25 - Renewal membership
(3 or more family members, with children under 18)

\$5 - Junior membership (under 18) Tech member (first season free)

MPI Donors Play a Part

Our facility is continuously being improved so that we can provide a more enjoyable venue for everyone involved in the Mariemont Players theater experience. Improvements from the last few seasons include:

New Windows in the Hurst Club Room ▪ New Costume facilities ▪ New Front, rear, and stage doors
New First floor handicap accessible restroom ▪ New Greenroom and make-up area ▪ New Roof

...with much more planned! These improvements are made possible by the generosity of MPI Donors. Donations are tax-deductible and are always acknowledged with a listing in the program for each show of the season. Your donation can be included with your membership application today. Just select one of the following levels and add the tax-deductible contribution amount to your membership dues payment below.

\$100+ Director \$75-99 Producer \$50-74 Angel \$25-49 Quarter Club \$15-24 Patron

How would you like your name(s) to appear on the program page? _____

Membership Dues Subtotal: \$ _____

Tax-Deductible Contribution: \$ _____

Total Payment Amount: \$ _____

Please make checks payable to MPI and submit completed application with payment to:

Jocelyne Jason, MPI Membership Chair
2444 Madison Road #1909, Cinti., OH 45208