



2022-2023 Membership Form

Today's Date: _____

Membership Type

Membership runs June 1, 2022 - May 31, 2023

\$20 Individual Adult

\$30 Family

(* family membership is for those living at the same address)

Current TDW Show (if applicable): _____

For TDW to contact you with membership updates and TDW activities, we request your contact information. We also like to celebrate your milestones via TDW email and/or

TDW Members Only Facebook group. We will not post or share your information outside of TDW.

However, once a year, we do share mailing information with ACT for their use in sending OCTA Southwest Regional Conference information to you. Please provide information you are willing to share with us.

Your Name: _____ Email: _____

Street/PO Box: _____ City: _____ State: _____ Zip: _____

Mobile Phone: _____ Home Phone: _____

Birthday: _____ Anniversary: _____
(optional) (optional)

My Skills and Interests are (circle all that apply): ¹Acting ²Directing ³Producing ⁴Costumes ⁵Stage Managing ⁶Props ⁷Set Design ⁸Set Construction ⁹Sound Design ¹⁰Sound Execution ¹¹Light Design ¹²Light Execution ¹³Stage Crew ¹⁴Sewing ¹⁵Publicity ¹⁶Hospitality ¹⁷House Managing ¹⁸Ushering ¹⁹Choreography ²⁰Music ²¹Stage Combat ²²Playwriting ²³Web stuff ²⁴Scenic Painting ²⁵Lobby Display ²⁶Painting ²⁷Set Décor *Other:


For family memberships, please include (below or on back) each member's contact info, milestones and skills/interests.

Name: _____ Birthday: _____ (optional)
Email: _____ Mobile Phone: _____
Skills and Interests (list or use # above):

Name: _____ Birthday: _____ (optional)
Email: _____ Mobile Phone: _____
Skills and Interests (list or use # above):

Name: _____ Birthday: _____ (optional)
Email: _____ Mobile Phone: _____
Skills and Interests (list or use # above):

If you wish to become a **FRIEND OF THE DRAMA WORKSHOP**, please circle the level you wish to donate.
**This will be recognized in our program for each show in the current season.*
\$1500+ Angel \$1000+ Playwright
\$500+ Director \$100+ Producer
\$50+ Designer \$25+ Actor

Print and mail this form with your check made out to
Email this completed pdf to tdw.membership@gmail.com
THE DRAMA WORKSHOP to: or 
Membership Chair
c/o The Drama Workshop
3716 Glenmore Ave.
Cheviot, OH 45211
scan to Pay via Paypal

Payment Type: Check Cash Credit Card Paypal Payment Amount: \$ _____
***Office Use Only *** Membership Entered Friend Entered FB Members Only Membership Card