



## 2025-26 Membership Form

Today's Date: \_\_\_\_\_

Membership Type

Membership runs June 1, 2025 - May 31, 2026

☐ \$20 Individual Adult

☐ \$30 Family

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

Current TDW Show (if applicable): \_\_\_\_\_

Monthly, we acknowledge members' birthdays and anniversaries via membership email and facebook. Your contact information is only shared with ACT for their use in sending OCTA Southwest Regional Convention information to you.

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STREET/PO BOX: \_\_\_\_\_ CITY/ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ ANNIVERSARY: \_\_\_\_\_  
(OPTIONAL) (OPTIONAL)

EMERGENCY CONTACT: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

EMERGENCY CONTACT PHONE: \_\_\_\_\_ ALTERNATE: \_\_\_\_\_

### Please rate your interest /skill in learning and helping in these aspects of TDW operations.

(1=beginner/want to learn; 2=can do independently; 3=can lead/teach. If no interest, please leave blank)

	Acting		Set Decor		Music Direction		Sewing		Ushering		Social Media
	Directing		Sound Design		Vocal Direction		Props		Box Office		Grant Writing/ Fundraising
	Producing		Sound Execution		Stage Combat Choreography		Dialect Coach		Photography		Painting (general facility)
	Stage Managing		Lighting Design		Intimacy Director		Backstage Crew		Graphic Design		Handyman / Facility Maint
	Set Design		Lighting Execution		Costume Design		Dramaturgy		Lobby Display		Admin/Office
	Set Construction		Projections		Wigs / Hairstyling		House Managing		Web Design		Musician: _____
	Scenic Painting		Choreography		Stage & Special Effects Makeup		Hospitality / Concessions		Publicity		Other: _____

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

NAME _____	NAME _____
EMAIL _____	EMAIL _____
PHONE _____	PHONE _____
Skills / Interests: _____	Skills / Interests: _____

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 programs for the current season.*

- |                                       |  |
|---------------------------------------|--|
| <input type="radio"/> \$1500+ Angel   | <input type="radio"/> \$1000+ Playwright |
| <input type="radio"/> \$500+ Director | <input type="radio"/> \$100+ Producer    |
| <input type="radio"/> \$50+ Designer  | <input type="radio"/> \$25+ Actor        |

Print and mail this form with your check made out to

**THE DRAMA WORKSHOP to:**  
**Membership Chair**  
**c/o The Drama Workshop**  
**3716 Glenmore Ave.**  
**Cheviot, OH 45211**

or

Email this completed pdf to  
tdw.membership@gmail.com



Scan to Pay via Credit Card

Payment Type: ☐ Check ☐ Cash ☐ Credit Card ☐ Paypal

Payment Amount: \$ \_\_\_\_\_

\*\*\*Office Use Only \*\*\*

☐ Membership Entered ☐ Friend Entered

☐ FB TDW Members Only Page

-----**FORM CONTINUED ON OTHER SIDE**-----

# TDW – MEMBERSHIP EXPECTATIONS AND RESOURCES

## **PURPOSE**

The Drama Workshop is committed to the creative fulfillment of our members involved in our productions. We recognize our members' health and safety on each production is an absolute prerequisite to that creative fulfillment.

This document establishes TDW's expectations regarding:

- Intimate on-stage contact (kissing, etc.)
- Dangerous on-stage contact (fighting, falls, etc.)
- Sexual Harassment and Bullying

Also established here in this document are resources for members to pursue when these guidelines aren't followed.

## **SEXUAL HARASSMENT**

The Drama Workshop does not tolerate sexual harassment among our volunteers. Sexual harassment can include unwelcome sexual advances, persistent offensive sexual jokes, sharing of offensive material, inappropriate or unwelcome touching, or any conduct of a sexual nature which interferes with the performance of a person's role or which creates an intimidating, hostile or offensive environment.

## **HAZARDOUS CONTACT**

Fights Scenes: All fight and fall action will have a designated fight choreographer. Ample time will be given to ensure the safety of all involved. All changes will be communicated to the cast through the fight choreographer.

Intimate Contact: All intimate contact will be blocked by the director or a person assigned by the director, with the consent of the actors. This blocking will include which body parts are in contact, in what manner, and for how long. All blocking of intimate and fight contact must be followed by actors without adlib.

## **BULLYING**

Bullying is not tolerated at The Drama Workshop. This can include any health-harming mistreatment, including threatening, humiliating or intimidating behaviors, sabotage, or verbal abuse.

## **CONFIDENTIAL ADVISOR**

The production will establish a Confidential Advisor (CA) for reporting of issues. The CA is a liaison and reporting channel between the participants and the production (director and producer). The CA will solicit concerns from cast members and deliver (with anonymity when possible) to the production. The CA will hold regular one-on-one check-ins with cast members involved in intimate/fight contact both during pre-production and once the production opens. Any cast or crew member can utilize the CA to report concerns to the production anonymously, whether involved in fight/intimate contact or not. Every concern will follow TDW's CONCERN RESOLUTION PATH (CRP). The CA for TDW's 2023-24 season will be named and made clear to the cast of each production.

## **AGREEMENT**

By signing below, I agree that I will follow the guidelines above while volunteering at The Drama Workshop. I acknowledge that behavior in violation of these guidelines can result in actions up to and including dismissal from a production, revocation of TDW membership, and barring from involvement in future TDW productions.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature (initials if submitting electronically)

\_\_\_\_\_  
Date