

## SHINFIELD PLAYERS THEATRE

Shinfield Park, Whitley Wood Lane, Reading. RG2 9DF Box Office: 07482 553923 or boxoffice@shinfieldplayers.org.uk



## **APPLICATION FOR MEMBERSHIP 2024-2025**

I wish to support Shinfield Players Theatre by becoming a member. Membership fee is **£30** per year for all members, FOH and Stage Managers. There are additional show levies (**£15**; concessions **£10**) and script fees (**at cost**) payable per show at casting point for those performing on stage. (Concessions: senior citizens, students with NUS card, Youth Group members, income support and job seekers allowance holders)

YOUTH GROUP MEMBERS SHOULD COMPLETE THE YOUTH GROUP FORM AVAILABLE FROM YOUTH GROUP LEADERS.

Please complete in CAPITALS and confirm agreement to the statements below by ticking the boxes

NAME: .....

ADDRESS: .....

.....

POST CODE: ..... TEL. NO: .....

E-MAIL: .....

I enclose herewith my membership fee of **£30.** (cash or cheque payable to **Shinfield Players Theatre** or BACS: sort code:30-91-31 account: 00157815 reference: 'membership')

I agree to pay show levies (£15/£10) and script fees (at cost) per show in which I perform.

I agree to offering some of my time to work in FOH, Bar, backstage, or a working session.

I agree to SPT holding my contact details electronically & to be contacted regarding their activities.

I have read the SPT Code of Conduct (available via the website) and agree to abide by it and any further updates sent to members.

Year first joined or first show:

Please list any skills that may be useful to the Theatre e.g. builder, carpenter, electrician, plumber, scenic artist, marketing, media, catering, front of house staff etc.

.....

Signed: ..... Date: .....

**GIFT AID DECLARATION:** If you are a regular taxpayer, the theatre can reclaim basic-rate tax from HM Revenue & Customs. Please read and sign below: I would like Shinfield Players Theatre (Registered Charity Number 1154841) to treat all membership subscriptions and other donations I have made since 6 April 2014 and all membership subscriptions and other donations I make thereafter as Gift Aid donations.

Signed: ..... Date: .....

**Notes:** You can cancel this declaration at any time by notifying the Secretary or Treasurer in writing. Please inform us of any changes to your name/address/contactdetails.

Completed membership forms together with the appropriate fee should be returned to: The Treasurer, Mrs S Gowen, 28 Kingfisher Grove, Reading. RG7 1RA, left behind the Bar at the Theatre or handed to a committee member. Forms can also be emailed to membership@shinfieldplayers.co.uk