



**2020**  
**Performing Arts Guild Membership Form**

Yes, I want to support the arts in my community through the Performing Arts Guild. I am enclosing my check for \$30.00. Membership form and check (made payable to PAG) should be mailed to :   PAG   P.O.Box 157   Mount Morris, IL   61054.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

I would be interested in helping out in PAG productions.

I am interested in: (circle as many as apply)

Backstage    Planning New Productions    Serving on a Committee    Costumes

Makeup    Ticket Sales    Ushering    Lights/Sound    Set Building

Other: \_\_\_\_\_

I would like to see PAG do the following productions(s) in the future:

\_\_\_\_\_  
\_\_\_\_\_

**Performing Arts Guild    P.O.Box 157    Mount Morris, IL    61054**

