



English Theatre Leipzig e.V.
Lützner Str. 29, 04177 Leipzig
GERMANY

SUPPORTING MEMBERSHIP APPLICATION FORM

Name:

Name:

Date of birth:

Geburtsdatum:

Phone:

Telefon:

Address:

Adresse:

City:

Stadt:

Postal Code:

PLZ:

Email address:

E-Mail-Adresse:

TYPE OF MEMBERSHIP

“FRONT-OF-HOUSE”

Contribution – 60€ per year

What you get – Membership card with 6 (six) concession tickets per year

– Regular email updates concerning auditions, workshops and up-coming shows

“STAGEHAND”

Contribution – 80€ per year

What you get – Membership card with 8 (eight) concession tickets per year

– Regular email updates concerning auditions, workshops and up-coming shows

DIRECTOR

Contribution – 100€ per year

What you get – Membership card with 10 (ten) concession tickets per year

– Regular email updates concerning auditions, workshops and up-coming shows

SIGNATURE

Signature of applicant:

Unterschrift des Antragstellers:

Place:

Ort:

Date:

Datum: