



FLORIDA THEATRE CONFERENCE Individual Registration Form

Individual Name _____

Contact Person (If Applicable) _____

Address _____ City _____ State _____ Zip _____

Evening Phone _____ Day Phone _____

Email _____

Check Divisional Choice:

- Community Theatre Theatre for Youth College/University
 Professional Theatre Secondary School

Annual Membership Fee (required) \$45.00 \$ _____

Lifetime Membership Fee \$400.00 \$ _____

Student Membership Fee (Includes T-shirt)
____(S)____(M)____(L)____(XL)____(XXL) \$35.00 \$ _____

Festival Registration Fee (required) \$45.00 \$ _____

Optional T-Shirt
____(S)____(M)____(L)____(XL)____(XXL) \$15.00 \$ _____

With the decrease in funding for the arts from the State of Florida, your contributions are becoming increasingly important to allow us to continue providing services to theatre institutions of Florida. Please include any contribution you can.

Charitable Contribution

\$ _____

Total \$ _____

Signature _____ Date _____

Mail completed registration form with payment payable to **Florida Theatre Conference**

Florida Theatre Conference
Robert Ankrom
9022 41st Way
Pinellas Park, FL 33782