

WYANDOTTE  
*Community Theatre*



Season Ticket Membership  
2017 - 2018

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State \_\_\_\_\_  
Zipcode \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Email Address \_\_\_\_\_

	Adult	\$ 27.00
	Student	\$ 25.00
	Senior Citizen	\$ 25.00
	Patron	\$ 75.00
	Angel	\$125.00
Cash:	Check#:	
Total Paid:		

Preferred Contact Method (check one):  
Email \_\_\_\_\_ Phone \_\_\_\_\_ Mail \_\_\_\_\_

Are you interested in helping out with show  
Yes \_\_\_\_\_ No \_\_\_\_\_

PLEASE TEAR FORM AT THE DOTTED LINE

## Wyandotte Community Theatre Membership Form

Fill out the top portion of this form completely. Mail the form along with your check made payable to "Wyandotte Community Theatre" to:

Wyandotte Community Theatre  
Attn: Membership  
1606 15th Street  
Wyandotte, MI 48192

*Thank you for your support!*

Visit Us Online At:

[www.wyandottecommunitytheatre.com](http://www.wyandottecommunitytheatre.com)

[www.facebook.com/WyandotteCommunityTheatre](http://www.facebook.com/WyandotteCommunityTheatre)