



PAG Membership Form

Individual/Family Membership - \$25.00

Yes, I want to support the arts in my community through the Performing Arts Guild. I am enclosing my check for \$25.00. Membership form and check should be mailed/made payable to: PAG, P.O. Box 157, Mount Morris, Illinois 61054.

Name: _____

Address: _____

Phone: _____

Email: _____

I would be interested in helping out in future PAG performances.

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

Backstage

Planning New Productions

Serving on a Committee

Costumes

Makeup

Ticket Sales

Lights/Sound

Set Building

Other: _____

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

Performing Arts Guild
P.O. Box 157
Mt. Morris, IL
performingartsguild.com