

Lapeer Community Theatre Membership Form

Regular
or Youth

_____	_____	_____
Last Name	First Name	Telephone
_____	_____	
Last Name	First Name	
_____	_____	
Last Name	First Name	
_____	_____	
Last Name	First Name	

Street		
_____	_____	
City	Zip	

email		

Dues

Regular - \$10
(18 or older)
Youth - \$5
(Under 18)

Total

Return to
Lapeer Community Theatre
P.O. Box 611
Lapeer, MI 48446

Please make your check payable to
Lapeer Community Theatre