



# Texas Nonprofit Theatres Organizational Membership Form

*The TNT Membership Year is from January 1 through December 31*

LEGAL Name of Theatre/Org:

PREFERRED NAME (To be used in all TNT publications and communications):

Physical Address:

Mailing Address:

County:

City:

State:

Zip:

Year Incorporated:

Are you a 501(C)3? Yes  No

Business Office Phone:

Box Office Phone:

Fax Number:

E-mail:

Web address:

Contact person:

Title:

Contact person's phone (if different from or in place of Bus/Box office numbers above):

Yes, please send me Texas Topics Too! - TNT's bi-monthly e-newsletter.

No, please do not send Texas Topics Too! to me.

**Organization Information: Please check the most appropriate box:**

- Nonprofit Producing organization that mounts its own shows
- Nonprofit Presenting \_\_\_organization or \_\_\_facility that does not mount its own shows - books in others
- Nonprofit Producing/Presenting organization that mounts own shows and books in other organizations' shows
- College/University Theatre \_\_\_ using only enrolled students/faculty \_\_\_ using people from the community as well
- Association of theatres or arts groups
- For profit theatre or theatre industry related organization or business: \$100 Industry level minimum

**Please check the one that most accurately describes your theatre staffing situation:**

- All volunteer theatre - no paid staff, no limited contracts
- Volunteer Community Theatre using limited term contracts for \_\_\_Artistic \_\_\_Administrative \_\_\_Technical Labor
- Theatre with full time paid staff, non Equity - \_\_\_ Community Theatre \_\_\_ Semi professional \_\_\_ College theatre
- Professional theatre using Equity contracts
- Other - please describe \_\_\_\_\_

We would like to participate in the TNT Member Discount Program, offering discounts on tickets to our performances to other TNT members. Please contact me for details.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Membership Categories:**

- \$1000 - BENEFACTOR
- \$500 - SPONSOR
- \$250 - CONTRIBUTOR
- \$100 - PATRON
- \$75 - REGULAR

Payment plans are available for levels of \$500+. Please check here \_\_\_ and TNT will call you to set it up.

**Membership Amount:**

**We would like to donate to the TNT Endowment:**

TOTAL AMOUNT ENCLOSED: \$

Payment by:  Check  MC / Visa / Am Ex /Discover

This is a PDF Fill-In Form which may be submitted online by clicking the Submit button below. Credit card payments should be made after you submit this form via the TNT Store (click here).

**IF YOU HAVE NOT HEARD FROM TNT VIA E-MAIL WITHIN 24 HOURS OF SUBMISSION, PLEASE CONTACT THE TNT OFFICE AT 817-731-2238.**

**Submit Via Email**

**Clear Form**

You may also print and mail this form to TNT, 1300 Gendy St, Fort Worth, TX 76107 or fax it to 817-731-2239.

•For Office Use Only•	Rec'd: / /	Check #:	Check date: / /
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