

ACT Family Information Form

ACTor Name/Town/School: _____

ACTor Name/School: _____

ACTor Name/School: _____

Parent Name: _____

Employer/Occupation: _____

Parent Name: _____

Employer/Occupation: _____

Because ACT is a volunteer-run organization, do you have any skills or experiences that might help with this production, or with the ACT organization?

Do you have any suggestions for how ACT can raise its visibility in the community?

I/We are interested in learning more about:

- | | |
|---------------------------|-----------------------------|
| ◇ Producer | ◇ Selling advertisements |
| ◇ Rehearsal Assistant | ◇ Program |
| ◇ Sets | ◇ Well Wishers |
| ◇ Costumes | ◇ Fundraising/Grant Writing |
| ◇ Props | ◇ Board membership |
| ◇ Ticket Sales | ◇ Run Crew |
| ◇ House/Bio Boards | ◇ Publicity |
| ◇ Trinkets/Raffle | ◇ Other: _____ |
| ◇ Advertising my business | |