DRAMA LEAGUE MEMBER INFORMATION

Titles:	□ Mr. □ Mrs. □ Ms. □ Dr. □	M F	M B	E R S H)		
Suffixes:	□ Jr. □ Ph.D.□ MD □ III □	/// L	. M D	LKJI	1 1 1		
Member Name		□ Nev	v Member	r			
Address	☐ Renewing Member						
				\$49 First-Year Basic			
City/State/Zip		□ Ind	dividual	\$85			
Telephone	()	☐ Fri	iend	\$125			
	· /	☐ Ar	ngel	\$250			
E-Mail	@	□Ве	enefactor	\$500			
	Deliver my member newsletter by (choose one): □ E-mail at the address above (FREE, Default) □ Regular Mail at the address listed above (+\$15/yr.) □ Both E-Mail and Regular Mail (+\$20/yr.)	☐ Pa	itron	\$1000			
		□ Sp	onsor	\$2500			
		☐ Sto	ar	\$5000			
		☐ Ac	J Add′l Card +\$25				
voung artists in need \$			gular Ma	il+\$15			
			-Mail & Regular Mail +\$20				
☐ I'd like a second gift membership for my spouse (\$25)			Donation				
Name TOTA			I				
☐ To use 100% omy cap, tote, or	of my membership to help young artists, please do not send journal.	101/1	·L				
PAYMENT			SPFCI	IAL REQUI	- - STS		
☐ Check/Money Order Enclosed ☐ Visa ☐ MasterCard ☐ American Express				TE REGO	1010		
Card Number							
Expiration Date Signature							
Name on Card:							
□ I am enclosing □ sending separate matching gift forms from my employer to increase my benefit level.							
Please allow 3 weeks for processing from the date of receipt. Member newsletters are mailed at the beginning of each month throughout the theatre season. If you have any questions, please call (212) 564-1142.							