

ACT-CO

ASSOCIATION OF COMMUNITY THEATRES - CENTRAL ONTARIO

ACT-CO Membership Form 2023-2024

A Public Information <i>(This information may be listed on the ACT-CO website and would be available to the public)</i>			
1.	Group Legal Name		
2.	Group Operating Name		
3.	Group Mailing Address <i>(complete)</i>		
4.	Address of rehearsal venue <i>(complete)</i>		
5.	Address of performance venue <i>(complete)</i>		
6.	Group Website		
7.	Box Office Phone-#		
B Private Information <i>(This information is securely retained for ACT-CO purposes only)</i>			
1.	Approx. day of your group's regular Board meetings <i>e.g., first Monday or 3rd Tuesday, etc.</i>		
2.	Month of group AGM		
3.	Organization Structure	<input type="checkbox"/>	Registered Charity
		<input type="checkbox"/>	Registered not-for-profit organization
		<input type="checkbox"/>	Other <i>(please specify)</i>
4.	Does your group operate a youth program?	<input type="checkbox"/>	Yes
		<input type="checkbox"/>	No
C Group Contact Information <i>(Please provide 3 contacts from your group who will be the recipients of ACT-CO communications.)</i>			
1.	Name		Role
	Phone-#		Email
2.	Name		Role
	Phone-#		Email
3.	Name		Role
	Phone-#		Email
D ACT-CO Liaison <i>(The liaison will forward ACT-CO communications to the group's membership.)</i>			
4.	Name		Role
	Phone-#		Email
		Group ACT-CO Liaison	

Fee: \$100	Payment must be received by September 1st to be entered into a draw for free membership.
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ACT-CO Membership can be paid by e-transfer to treasurer@actco.ca or by mail to ACT-CO, 44 Attridge Drive, Aurora, ON L4G 6J3