



# MEMBERSHIP FORM

*Our 2018 - 2019 Season*

Hello and Welcome to Hingham Civic Music Theatre. I am Deirdre Merritt, your Membership Chair, and I am delighted to be serving HCMT in this capacity! I am inviting new members to join **HINGHAM CIVIC MUSIC THEATRE** for this, *Our 2018 – 2019 Season*. We began as a group of singers in the Fall of 1948, known as the Hingham Civic Chorus. We've been thrilling South Shore audiences for **Seventy Years** and we're looking forward to thrilling them for **another Seventy!**

Many privileges come with your membership. As a member you will receive one complimentary ticket per production. You have the opportunity to perform in our productions (if you are cast); attend our social functions, workshops and meetings; receive an informative newsletter containing HCMT news and local community theatre information; participate on a committee to help with our productions; and, if eligible, apply for one of our scholarships. A One Year Membership beginning with our Fall Show will expire in June of the following year, or the year after that for Two Year Memberships. A One Year Membership beginning with our Spring Show will expire in December of the same year, or the year after that for Two Year Memberships. Student Memberships are for One Year only.

If not for our wonderful members, we never would have been able to present such musicals as *Beauty and the Beast*, *The Music Man*, *The Wizard of Oz*, *Joseph and the Amazing Technicolor Dreamcoat*, *Spamalot*, *State Fair*, *Shrek the Musical*, *Cabaret* and *Annie* to name a few.

Won't you join in the fun of being a member of **HINGHAM CIVIC MUSIC THEATRE**? Simply fill out the form below, make your check payable to HCMT, and mail to: HCMT Membership, c/o Deirdre Merritt, 493 Country Way, Scituate, MA 02066

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## HINGHAM CIVIC MUSIC THEATRE MEMBERSHIP APPLICATION FORM

Hingham Civic Music Theatre, c/o Deirdre Merritt, 493 Country Way, Scituate, MA 02066

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

E-MAIL \_\_\_\_\_

- |                               |   |  |
|-------------------------------|---|--|
| <b>Family Membership:</b>     | <input type="checkbox"/> 1 Year \$50.00 | <input type="checkbox"/> 2 Years \$65.00 |
| <b>Individual Membership:</b> | <input type="checkbox"/> 1 Year \$35.00 | <input type="checkbox"/> 2 Years \$50.00 |
| <b>Student Membership:</b>    | <input type="checkbox"/> 1 Year \$20.00 |  |

**I would like a copy of the By-Laws sent to me.**

I wish to make a tax-deductible contribution to Hingham Civic Music Theatre in the amount of (please check one):  
 \$25.00       \$50.00       \$100.00       Other \$ \_\_\_\_\_