



**APPLICATION FOR MEMBERSHIP  
PORT COQUITLAM THEATRE SOCIETY**  
A registered federal charity

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

Please enclose membership fee of **\$25.00** per membership payable to **Port Coquitlam Theatre Society** and mail to:

**Port Coquitlam Theatre Society**  
c/o Terry Fox Theatre  
1260 Riverwood Gate  
Port Coquitlam, BC V3B 7Z5

*Thank you for your support*

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