NEW MEMBERSHIP APPLICATION FORM

SHO (Support Hult Center Operations) is a dynamic volunteer organization whose members offer their valuable time, enthusiasm and knowledge to support the Hult Center operations and its patrons.

Join SHO and you will be welcomed into a group of like-minded individuals who value the performing arts. If you are interested in becoming a member and are 18 or older, please complete this application form. You will be contacted to attend an information session to learn more.

**Membership dues are $55 per fiscal year (July to June).** New members may join after January 1st for $30 only (partial year). Dues will be collected at the information session if you choose to become a member.

Today's Date: ________________

Name: ________________________________________________________

Address: ________________________________________________________

________________________________________________________

Phone: (Home) _________________________________  (Mobile) _____________________________

E-mail: ________________________________________________________

Members who enjoy interacting with the public and are available to volunteer for performances and special events 2-3 times a month may join the Usher Assist Program. **Usher Assist Volunteers must be able to:**

➢ Proactively welcome guests in a friendly and outgoing manner and to communicate courteously.
➢ Follow policies, procedures and directions provided by SHO and Hult Center.
➢ Stand 1-2 hours at a time.
➢ Climb ramps and stairs.
➢ Read theater tickets.
➢ Honor commitments regarding scheduling frequency, start time, dress code and assigned shows.
➢ Utilize a computer for email, SHO information, scheduling and communications.

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**– For SHO Use Only –**

Completed New Membership Application Form received on (date): ________________  By (name): ________________

Information session completed on (date): ________________  By: ________________

Information Verification: ID type: ________________________  ID#______________________  Exp. Date: ________________

In-person Training completed on (date): ________________  Trainer: ________________

Online Training completed on (date): ________________  Certificate of Completion sent: ________________

Payment received in: □ CASH - Amount: $___________ □ Check#Bank:______________________ Amount: $___________

Check payment received by SHO Treasurer and deposited on: (date): ____________________  (Add to Member Roster and inform leadership.)