NAME			
for events and matters		ffairs. The represe	this representative shall be the official contact entative is not precluded from additional fees
ADDRESS			
 PHONE	E-M/	AIL	
THEATRE AFFILIATION	N		
NOTE: Individuals who d	esire to participate in each Ne	ew Mexico State Fes	stival and/or Conference must be an individual dividuals from additional fees associated with
TYPE OF MEMBERSHI check the app	P: ropriate box and an	nount	
[] Adult [] Student [] Organizational [] Patron [] Additional Donation	(\$25.00 – 1 year) (\$15.00 – 1 year) (\$80.00 – 1 year) (\$100.00 – 1 year)		\$
		To	otal: \$
Make Checks Payable t	o TNM and MAIL T	O:	
Theatre New Mexi	co Eric Bjorklund 14	93 43rd Street	Los Alamos, NM 87544
Should you wish to p	pay your fees with a Cre	dit Card, please	supply the following information:
Card Type: N	lasterCard Visa	Discover	American Express
Exp. Date	Card #		Code # (back)
Name on Card (plea	ase print)		
Signature to authori	ze charges		