

# 2021-2022 Annual Membership Registration Invoice



**FLORIDA  
PROFESSIONAL  
PRESENTERS  
CONSORTIUM**

**Membership renewal due by July 1, 2021**

Renewing Membership \$250

New Membership \$250

Annual Membership for **July 1, 2021-June 30, 2022**  
includes up to three (3) representatives from the same  
presenting organization.

**Date:** \_\_\_\_\_

**Organization Name:** \_\_\_\_\_

**Primary Theatre Name:** \_\_\_\_\_ **Capacity:** \_\_\_\_\_

**Total Expenses - Fiscal Year Ending 2019:** \_\_\_\_\_ **Total Attendance - Fiscal Year Ending 2019:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**First Representative Name/Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Second Representative Name/Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Third Representative Name/Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Other contacts in your organization for email lists:**

(Programming) **Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

(Marketing) **Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

(Production) **Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

(Education) **Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Method of Payment:**

CHECK - Please make payable to:

***Florida Professional  
Presenters Consortium***

CREDIT CARD-(Online Registration recommended if paying by CC)

**Type:** \_\_\_\_\_

**Card #:** \_\_\_\_\_

**Exp:** \_\_\_\_\_ **CVVCode:** \_\_\_\_\_

**Name on Card:** \_\_\_\_\_ **BillingZip:** \_\_\_\_\_

**Return this form  
with payment to:**

**DUNCAN THEATRE**  
Attn: Mark Alexander  
4200 Congress Avenue MS#62  
Lake Worth, FL 33461  
**Email:** alexanmp@palmbeachstate.edu

*Florida Professional Presenters Consortium is a  
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