



NON-MEMBER SETUP FORM

ORGANIZATION INFORMATION:

Name of Organization/Producing Entity: _____

Legal Name (if different): _____

Office Phone: (____) _____ Office Fax: (____) _____

Box Office Phone: (____) _____ General Email: _____

Website: _____

Mailing Address: _____

Tax Status: FOR PROFIT NON-PROFIT Tax-ID Number: _____

Discipline(s): THEATRE MUSIC DANCE OPERA EDUCATION OTHER: _____

Annual Budget Size (round to the nearest \$10k): _____

Annual Audience Attendance (if a new organization, annual anticipated attendance): _____

of Paid Full-Time Staff: _____ # of Paid Part-Time Staff: _____

of Volunteers in Staff Positions: _____ # of General Volunteers (ushers, etc.): _____

Typical Performance Venue Size (number of seats): _____

Does your organization manage its own venue? Y N If so, venue name: _____

If yes, venue physical address: _____

TPL-LA member? Y N

STAFF:

Board Chair (if a non-profit organization): _____

Phone: (____) _____ Email: _____

Artistic Director (or contact regarding artistic issues): _____

Phone: (____) _____ Email: _____

Managing Director (or contact regarding organizational issues): _____

Phone: (____) _____ Email: _____

Marketing Director (or contact regarding marketing issues): _____

Phone: (____) _____ Email: _____

Box Office Manager (or contact regarding ticketing issues): _____

Phone: (____) _____ Email: _____