

Denver Ballet Guild Membership and Youth Program Membership Form

Renew by June 30 to be included in the DBG Directory



- ❖ All memberships are one year and extend from July 1 - June 30.
- ❖ For inclusion in the DBG and Youth Programs directory, please respond by June 30th.
- ❖ On-line renewal on our website encouraged: www.denverballetguild.org

Denver Ballet Guild Membership

Name _____ Spouse _____
Last Name First Name Middle Name Last Name First Name Middle Name

Social Invitation (circle one): Miss Mrs. Ms. Dr. Mr. The Honorable Mr. and Mrs. Dr. and Mrs. Mr. and Dr. Doctors Other

Address _____ City _____ State _____ Zip _____

*Email _____ Home Phone _____ Cell _____

*This information is provided for Denver Ballet Guild use only

Membership Level: Annual \$75 _____ Patron \$150 _____ Life Member \$750 _____ Young Professionals \$35 _____

Existing Life Member \$ 0 _____ Honoree Family \$ 0 _____

DBG Youth Programs Membership (Parent Custodian DBG Guild Membership also required)

Les Cygnettes \$ 275 _____ Young ladies in 6th, 7th, 8th grades

Les Demoiselles \$ 275 _____ Young ladies in 9th, 10th, 11th, 12th grades

Name _____ Date of Birth MM/DD/YY _____
Last Name First Name Middle Name

School _____ Grade in fall _____ Program _____

Address _____ City _____ State _____ Zip _____

*Email _____ Home Phone _____ Cell _____ Youth Phone _____

*This information is provided for Denver Ballet Guild use only

Parent Custodial Information

Parent Custodian # 1

Relationship to child _____ Adult Denver Ballet Guild Membership Level _____

Name _____ Spouse _____
Last Name First Name Middle Name Last Name First Name Middle Name

Social Invitation (circle one): Miss Mrs. Ms. Dr. Mr. The Honorable Mr. and Mrs. Dr. and Mrs. Mr. and Dr. Doctors Other

Address _____ City _____ State _____ Zip _____

If different from the child

*Email _____ Home Phone _____ Cell _____

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THE DENVER BALLET GUILD

Denver Ballet Guild Membership and Youth Program Membership Form (cont.)

Parent Custodial Information

Parent Custodian # 2

Relationship to child _____ Adult DBG Membership Level _____

Name _____ Spouse _____
Last Name First Name Middle Name Last Name First Name Middle Name

Social Invitation (circle one): Miss Mrs. Ms. Dr. Mr. The Honorable Mr. and Mrs. Dr. and Mrs. Mr. and Dr. Doctors Other

Address _____ City _____ State _____ Zip _____

*Email _____ Home Phone _____ Cell _____

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Child resides with _____

I authorize the Denver Ballet Guild to photograph and record Les Demoiselles/Les Cygnette members and use any resulting materials and member's name, image, voice and likeness, without further approval or compensation, for Denver Ballet Guild promotional purposes. Check here Opt Out

Year of high school graduation _____

Volunteer Opportunities

Recruitment of talented adults and youth volunteers is important to our community. Please let us know how you would like to become involved!

I want to volunteer in the following areas:

- | | | |
|---|--|--|
| <input type="checkbox"/> Database/Website Coordinator | <input type="checkbox"/> Marketing/Publicity | <input type="checkbox"/> Les Cygnettes |
| <input type="checkbox"/> Event Hostess | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Les Demoiselles |
| <input type="checkbox"/> Finance/Accounting | <input type="checkbox"/> Photography/Historian | <input type="checkbox"/> In-school Program |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Special Events | <input type="checkbox"/> Showcase of Dance |
| <input type="checkbox"/> Leadership Role | <input type="checkbox"/> Le Bal de Ballet | <input type="checkbox"/> Young Dancers Competition |

Membership Summary

Guild Membership

<input type="checkbox"/> Annual.....\$	75
<input type="checkbox"/> Patron Level.....\$	150
<input type="checkbox"/> Life Member.....\$	750
<input type="checkbox"/> Young Professionals.....\$	35
<input type="checkbox"/> Existing Life Member.....\$	0
<input type="checkbox"/> Honoree family.....\$	0
Guild membership total: \$	_____

Youth Programs

(Guild membership is required)

<input type="checkbox"/> Les Cygnettes.....\$	275
<input type="checkbox"/> Les Demoiselles.....\$	275
Youth program total: \$	_____

Donations

Community Enrichment	\$ _____
Dance Education	_____
Endowment Trust	_____
Le Bal de Ballet	_____
Unrestricted Giving	_____
Donation total	\$ _____

Grand total enclosed \$ _____

If you know of any potential members whom we should contact, please let us know:

Name _____

Contact Information _____

Le Bal de Ballet Honorees and Young Men of Distinction are recommended each year to the DBG Board by DBG Members.

Please mail completed form with a check made payable to Denver Ballet Guild to the following address:

Denver Ballet Guild
P.O. Box 2656
Littleton, CO 80161-2656

Visit us online at: www.denverballetguild.org

