CREW ASSIGNMENT SHEET

___ **Theatre Partic.** ___ **Stagecrafts** ___ **Costume Crafts** ___ **Drama Apprec.**

Name _____ Home Phone # _____
Address _____ Emergency Phone # _____
Student Number: _____

Check the option that you prefer:
Backstage Running Crew _____ Construction Crew _____

If you checked running crew state show preference:_____ and area preference:
deck crew ____ props ____ lighting ____ sound _____ wardrobe _____

If you checked production crew, state preference: scenery _____ costumes _____

Please cross out the times below that you are ***not*** available for shop time:

	Monday	**Tuesday**	**Wednesday**	**Thursday**	**Friday**
1:00 PM					
2:00 PM					
3:00 PM					
4:00 PM					
5:00 PM					

Indicate dates and times worked below:

Date	Time In	Time Out	Daily Total	Date	Time In	Time Out	Daily Total	Date	Time In	Time Out	Daily Total

Total Hours Worked: _____