

Theatre Allies

Member Alliance Agreement

This agreement documents the desire of (Theatre A) and (Theatre B) to enter into a cooperative relationship as Theatre Allies for a period of one year. As an initial step on that journey, (Theatre A) agrees to underwrite all or a portion of a one-year organizational membership with the American Association of Community Theatre (AACT) for (Theatre B). This sponsorship will make all of the AACT membership resources (collaboration, vendor and educational programming discounts, management documents, etc.) available to (Theatre B).

In addition, during the alliance year, (Theatre A) agrees to serve as a resource for (Theatre B). This will include regular contacts with (Theatre B) (minimum of once per month). Contacts may be in person, via phone or email. During contacts, or other times as needed, (Theatre B) agrees to provide (Theatre A) information regarding successes, challenges, questions regarding the management and operation of their organization (e.g., not-for-profit status, Board of Directors, sponsorship/ticket pricing, grants/fundraising, staffing, educational and stage programming, artistic challenges, etc.). (Theatre A) agrees to honor (Theatre B's) trust and maintain confidentiality of information provided. Further, (Theatre A) agrees to act as a "mentor" in providing (Theatre B) with information, best practices, advice based upon experiential knowledge, and materials/resources (free or at reduced cost) as needed and able.

Both Allies agree to provide the AACT national office periodic updates as to their perceived successes, challenges, and value of the Theatre Allies program. In addition, the two Allies will offer any suggestions for improvements, adjustments, or beneficial additions to the program, based upon their experiences.

Should both Theatre Allies desire to extend their documented alliance beyond the initial one-year commitment, unlimited extensions of this agreement may be executed with the AACT national office.

(Theatre A)

(Theatre B)

Authorizing Signature/Title

Authorizing Signature/Title

Date

Date

Received and Recorded by: _____
AACT Staff Signature/Title

Date

*Please complete and forward agreement to Member Engagement Director Geoff Leonard-Robinson at geoff@aact.org

