

Promoting the Appreciation of Classical Music through Performance and Education

Year: 2016 to 2017

## **MEMBERSHIP REGISTRATION FORM**

LAST NAME	FIRST NAME	E & M.I. (if any)	Print your na	me as you would want it to appear in a Program					
MAI	LING ADDRESS			HOME ADDRESS					
	TOWN			ZIP CODE					
HOME	PHONE	CELL PHO	DNE	E-MAIL ADDRESS					

I offer my home and piano for a monthly meeting (Indicate month):

## Membership Category

- - -

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Requested month of Performance Select one													
×	Category	Voice / Instru	ument Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	
	Solo Performer												
Х	Category	So	oprano (X)	Alto (X)	Te	enor (X)	Bas	ss (X)		-			
	Choral Singer												
х	Category		Couple or Single???										
	General / List	tener											

Please send copies of newsletters to me via postal mail ("snail mail") \_\_\_\_\_ I prefer to receive newsletters via email\_\_\_\_\_

## Annual Member Registration Fees:

S- Couples Membership=\$40.00 S - Individual Membership=\$25.00 S - Students under 21 Welcome free of charge

I would like to make a donation to the CMC scholarship fund: \$10\_\_\_\$25\_\_\_\$50\_\_\$100\_\_Other\_\_\_ Total with dues: <sub>\$</sub>

Please make check payable to Chatham Music Club, and include with <u>completed</u> Registration Form

Mail to: *Chatham Music Club, PO Box 1649, West Chatham,MA 02669* I understand that my contact information will be in the CMC membership directory