MEMBERSHIP APPLICATION
FAMILY NAME (Block letters please)
PREFERRED FIRST NAME
POSTAL ADDRESS
PHONE NUMBER(S)
MOBILEH/W
EMAIL ADDRESS (for newsletters etc)
2024 SUBSCRIPTIONS (Circle 1 option)
<ul> <li>\$40 Performing member for each concert</li> <li>\$20 Subscribing member (Friends of the choir) - for a year</li> <li>\$10 Youth Subscription for those 25 years old or under – for each concert.</li> <li>Donations gratefully received.</li> </ul>
Paid by Cash / Direct Payment
Account - The Edgecumbe Choir 01-0310-0035858-00
PERFORMING MEMBERS ONLY:
I am a Soprano / Alto / Tenor / Bass / ??
I can read music Yes / No
If accepted, I agree to pay the Sub &
abide by the Choir Constitution & Rules
SIGNED

**EDGECUMBE CHOIR**