

**STAMBAUGH CHORUS**  
**NEW MEMBER REGISTRATION FORM**  
PLEASE PRINT LEGIBLY

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Write your name as you would like it to appear in the program

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

E-Mail is strongly encouraged

Do you have mobility limitations that may effect your ability to stand for extended periods or to climb stairs? Circle : YES or No

I hereby consent to the use of my name and image in all of Stambaugh Chorus' publicity, including its website, and its inclusion of my name, address, phone number(s), and email address in the Chorus directory.

\_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Member Signature

Membership dues: \$30@ Semester \_\_\_\_\_

Circle Current: Fall Semester/ Spring Semester

Subtotal \_\_\_\_\_

Vocal Part S A T B Circle On

Donation Amount \_\_\_\_\_

Stambaugh Chorus greatly appreciates your support

Total Amount Attached \_\_\_\_\_

Please bring completed form and give it to the Membership Chairperson. Please return this form ASAP even if you are not paying the dues now so that we can record your contact information. Thank you and welcome to Stambaugh Chorus.