

**MEMBERSHIP APPLICATION FORM**

PLEASE PRINT

**1. Personal Information**

Name \_\_\_\_\_  
(First, Middle, Last)

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Cellular \_\_\_\_\_

Email address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Primary Instrument \_\_\_\_\_ No. of yrs. \_\_\_\_\_ Auxiliary Instrument \_\_\_\_\_ No. of yrs. \_\_\_\_\_

**2. Church Information**

Name of Church \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Pastor \_\_\_\_\_ District \_\_\_\_\_

**3. Emergency Information**

In case of emergency notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Please indicate any health-related conditions in which the staff should be aware:

\_\_\_\_\_

**4. Membership Information** Please check one.

I am registering as an official member of the Jurisdictional Orchestra.  
*Official member dues are \$60.00 for the year.*

I am not registering as an official member, but I would like to participate.

Signature \_\_\_\_\_ Date \_\_\_\_\_