

**STATE COLLEGE CHORAL SOCIETY
MEMBERSHIP APPLICATION**

Name: (*circle one*) Ms. Mrs. Mr.

Address

Home phone

Cell phone

Email

Occupation

Work phone

Voice (*circle one*) Soprano 1 Soprano 2 Alto 1 Alto 2 Tenor 1 Tenor 2 Baritone Bass

Musical experience

Do you read music? (*circle one*) Easily Fairly well Not so well

Current membership in other musical organizations

How did you hear about SCCS?

Will you accept responsibility for regular attendance at rehearsals and performances?

Signature

Date

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