

## MEMBERSHIP FORM

Thank you for joining **THE PORT HURON MUSICALE**. Your membership is very important to this musical organization. To ensure that your name is listed in the membership booklet, your information must reach the Membership chairperson by August 15. **DUES ARE \$25**. You may bring the **MEMBERSHIP FORM** and your check made out to **The Port Huron Musicale** to any meeting or mail to:

Nancy Nyitray, Membership Chair

The Port Huron Musicale

2813 16th Ave

Port Huron, MI 48060

Questions concerning dues may be addressed to Nancy at 810-982-6304.

### THE PORT HURON MUSICALE MEMBERSHIP FORM

Name \_\_\_\_\_  
Last First

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
9 digits

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Dues: \_\_\_\_\_ \$25 Check # \_\_\_\_\_ Date \_\_\_\_\_

I am enclosing an additional donation in the amount of \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Every organization depends on their membership to be effective. Please check the area(s) where you can best share your talents with The Port Huron Musicale.

### I AM INTERESTED IN HELPING WITH THE FOLLOWING

Chorus \_\_\_\_\_  
Chorus Representative \_\_\_\_\_  
Scholarships \_\_\_\_\_  
March Student Recital \_\_\_\_\_  
Summer Music Camp Awards \_\_\_\_\_  
Music Festival \_\_\_\_\_  
Publicity and Communications \_\_\_\_\_  
Website \_\_\_\_\_  
Music Librarian \_\_\_\_\_  
Musicale Hour Concert Series \_\_\_\_\_

Officers  
President \_\_\_\_\_  
Vice President \_\_\_\_\_  
Recording Secretary \_\_\_\_\_  
Treasurer \_\_\_\_\_  
Assistant Treasurer \_\_\_\_\_  
Membership Secretary \_\_\_\_\_  
Corresponding Secretary \_\_\_\_\_  
Historian \_\_\_\_\_