



South Holland Master Chorale
16226 Wausau Ave., South Holland, IL 60473
Please attach your payment with this registration form
Registrations will not be accepted until after July 1, 2019

PLEASE PRINT

Today's Date _____ 2019-2020 SEASON Amount Due: **\$50.00**

Please Circle: Fall, 2019 Spring, 2020

Membership Status: (Please circle one) **NEW** **CURRENT** **RETURNING** Male ___ Female ___

Last Name First Name Middle Initial

Street Address

City State Zip Code

Home Phone Cell Phone Work Phone

Email Address

Name as you are casually addressed (e.g., Bob vs Robert) Name of Spouse/Significant Other (first & last name)

Name as you want it listed in the **Concert Program** (first & last name, middle initial if desired)

Name as you want it printed on your **Nametag** (first & last name) Do you need a name tag? **YES** **NO** (circle one)

Vocal Part: **SOPRANO 1** **SOPRANO 2** **ALTO 1** **ALTO 2**
(Please circle one) **TENOR 1** **TENOR 2** **BASS 1** **BASS 2**

Please enclose your completed application with your check/money order in the amount of **\$50.00** payable to **South Holland Master Chorale**, 16226 Wausau Ave., South Holland, IL 60473 (Cash accepted only in person)

Amount Paid \$ _____ Ck. #/M.O # _____ Date of Ck./M.O. _____