



**South Holland Master Chorale**  
**16226 Wausau Ave., South Holland, IL 60473**  
 Please attach your payment with this registration form

PLEASE PRINT      2021-2022 SEASON      BIRTHDAY: Month \_\_\_\_\_ Day \_\_\_\_\_

Today's Date \_\_\_\_\_ Spring, 2022      Amount Due: **\$50.00**

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

\_\_\_\_\_  
 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: (Please circle one)	<b>SOPRANO 1</b>	<b>SOPRANO 2</b>	<b>ALTO 1</b>	<b>ALTO 2</b>
	<b>TENOR 1</b>	<b>TENOR 2</b>	<b>BASS 1</b>	<b>BASS 2</b>

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

Registration fee included: \$ \_\_\_\_\_

- I am fully vaccinated. (Please be prepared to present your vaccination card at the first rehearsal if you have not already done so in 2021)
- I have received a booster shot.
- I would like to make an additional donation to the chorale to help offset the 2022 cost of:
  - Stipends for AI & Marilyn \$ \_\_\_\_\_
  - Musicians/Music \$ \_\_\_\_\_

Total amount enclosed: \$ \_\_\_\_\_

By submitting this registration form, I acknowledge the risk of being exposed to Covid 19 and its variants.

Ck. #/M.O # \_\_\_\_\_ Date of Ck./M.O. \_\_\_\_\_ Received: \_\_\_\_\_