



South Holland Master Chorale
Please attach your payment with this registration form

PLEASE PRINT 2022-2023 SEASON BIRTHDAY: Month _____ Day _____

Today's Date _____ Spring, 2023 Amount Due: **\$50.00**

Membership Status: (Check 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**

Vocal Part: Check one	SOPRANO 1	SOPRANO 2	ALTO 1	ALTO 2
	TENOR 1	TENOR 2	BASS 1	BASS 2

Please enclose your completed application with your check/money order payable to **South Holland Master Chorale, mail to Melodee Leimnetzer, 250 Hibiscus Circle, Matteson, IL 60443** (Cash 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 2022) You can also attached a copy of your vax card or email it to melodeejl11@att.net

I have received a booster shot.

I would like to make an additional donation to the chorale to help offset the 2023 cost of:
 Stipends for Phil \$ _____ for 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: _____