

Music No. _____ Membership \$ _____ Music Fee \$ _____ Major Work _____

BT___ SMc___ JR___ RK___

The above area for Society use only

Sectional Information

(Please print clearly)



Date: _____

Full Name _____
(the way you would like it to appear on the Concert Program)

Street Address _____

City _____ CA Zip Code _____

Area code: _____ Phone Number _____

Cell Phone Number: _____

Email address where you would like to receive choir communications *(please print clearly)*:

Are there other members of your household singing with the choir this season? Yes No (circle one)
(If so please list their names on the back of this sheet)

Vocal Section: (check which voice you will sing, *I.E. if you are a baritone you are a 1st Bass*)

Alto 1st _____ 2nd _____

Bass 1st _____ 2nd _____

Soprano 1st _____ 2nd _____

Tenor 1st _____ 2nd _____

1. Height with concert shoes: _____
(this is for the purpose of placing you in concert performances)

2. Would you be willing to volunteer to help the choir with--
(Check your preferences)

Concert set up _____

Concert decoration _____

Concert Publicity _____

Hospitality Committee _____

**If you have downloaded this from
the web site please mail it to:**

Robin Kraus
7318 St. John Way
Orangevale, CA 95662
Phone number-916-989-5748

**Would you be willing to have
your name and phone number included
in the choir directory? Yes No (circle one)**