



Application for Membership Consideration

*** PLEASE PRINT LEGIBLY ***

Date _____

Name _____
(as to appear in print publications)

Mailing
Address Street _____

City/State _____ Zip _____

Tel.# _____ Cell# _____

E Mail _____

Primary Instrument _____
(Euphonium: Treble Clef or Bass Clef?)

Do you own your instrument? Yes or No

Secondary Instrument(s)? _____
(list those on which you would be willing to perform.)

Profession _____
(if retired, please list your former profession, and add "- retired")

Please return completed form to:

Jane Milbrodt, Secretary
Bowling Green Area Community Bands
405 Madison Court
Bowling Green, OH 43402
jane.milbrodt@gmail.com

*** see over ***

Application for Membership Consideration, cont.



Please respond thoroughly to these questions:

How long have you played your primary instrument? *Private Lessons?*

Continuously, or with interruptions?

Where did you attend high school? college or university? (names & locations)

What are the years of your graduation(s)? (*a 'range' of yrs. will suffice*)

Did you play with the band all through the years of your schooling?

Signature _____

Please return completed form to:

**Jane Milbrodt, Secretary
Bowling Green Area Community Bands
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Bowling Green, OH 43402
jane.milbrodt@gmail.com**

Applicants can expect to be

- ***accepted** for full membership,*
- *or **placed** on a "wait list" (for consideration when vacancies occur),*
- *or **denied** membership*