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<!DOCTYPE HTML PUBLIC "-//W3C//DTD HTML 4.01//EN"
"http://www.w3.org/TR/html4/strict.dtd">
<html class="supernova"><head>
<meta http-equiv="Content-Type" content="text/html;
charset=utf-8" />
<link rel="alternate" type="application/json+oembed"
href="https://www.jotform.com/oembed/?format=json&url=http%
3A%2F%2Fwww.jotform.com%2Fform%2F70878085966172" title="oEmbed
Form"><link rel="alternate" type="text/xml+oembed"
href="https://www.jotform.com/oembed/?format=xml&url=http%3A%
2F%2Fwww.jotform.com%2Fform%2F70878085966172" title="oEmbed
Form">
<meta property="og:title" content="Professional Development
Workshop Registration Form" >
<meta property="og:url"
content="http://www.jotform.us/form/70878085966172" >
<meta property="og:description" content="Please click the link to
complete this form.">
<meta name="viewport" content="width=device-width, initial-scale=
1.0, maximum-scale=1.0, user-scalable=0" />
<meta name="HandheldFriendly" content="true" />
<title>Chapel Choir Member Form</title>
<link href="https://cdn.jotfor.ms/static/formCss.css?3.3.18119"
rel="stylesheet" type="text/css" />
<link type="text/css" rel="stylesheet"
href="https://cdn.jotfor.ms/css/styles/nova.css?3.3.18119" />
<link type="text/css" media="print" rel="stylesheet"
href="https://cdn.jotfor.ms/css/printForm.css?3.3.18119" />
<link type="text/css" rel="stylesheet"
href="https://cdn.jotfor.ms/themes/CSS/566a91c2977cdfcd478b4567.c
ss?"/>
<style type="text/css">
    .form-label-left{
        width:150px !important;
    }
    .form-line{
        padding-top:12px;
        padding-bottom:12px;
    }
    .form-label-right{
        width:150px !important;
    }
    body, html{
        margin:0;
        padding:0;
        background:false;
    }

    .form-all{
        margin:0px auto;
        padding-top:0px;
        width:650px;

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        color:#555 !important;
        font-family:"Lucida Grande", "Lucida Sans Unicode",
"Lucida Sans", Verdana, sans-serif;
        font-size:14px;
    }
    .form-radio-item label, .form-checkbox-item label, .form-
grading-label, .form-header{
        color: #555;
    }

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</style>

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<style type="text/css" id="form-designer-style">
    /* Injected CSS Code */
    .form-label.form-label-auto {

        display: block;
        float: none;
        text-align: left;
        width: 100%;

        }/*PREFERENCES STYLE*/
    .form-all {
        font-family: 'Lucida Grande', 'Lucida Sans Unicode',
'Lucida Sans', Verdana, Tahoma, sans-serif, sans-serif;
    }
    .form-all .qq-upload-button,
    .form-all .form-submit-button,
    .form-all .form-submit-reset,
    .form-all .form-submit-print {
        font-family: 'Lucida Grande', 'Lucida Sans Unicode',
'Lucida Sans', Verdana, Tahoma, sans-serif, sans-serif;
    }
    .form-all .form-pagebreak-back-container,
    .form-all .form-pagebreak-next-container {
        font-family: 'Lucida Grande', 'Lucida Sans Unicode',
'Lucida Sans', Verdana, Tahoma, sans-serif, sans-serif;
    }
    .form-header-group {
        font-family: 'Lucida Grande', 'Lucida Sans Unicode',
'Lucida Sans', Verdana, Tahoma, sans-serif, sans-serif;
    }
    .form-label {
        font-family: 'Lucida Grande', 'Lucida Sans Unicode',
'Lucida Sans', Verdana, Tahoma, sans-serif, sans-serif;
    }

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    .form-line {
        margin-top: 12px 36px 12px 36px px;
        margin-bottom: 12px 36px 12px 36px px;
    }

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}

.form-all {
    width: 650px;
}

.form-label-left,
.form-label-right {
    width: 150px
}

.form-all {
    font-size: 14pxpx
}
.form-all .qq-upload-button,
.form-all .qq-upload-button,
.form-all .form-submit-button,
.form-all .form-submit-reset,
.form-all .form-submit-print {
    font-size: 14pxpx
}
.form-all .form-pagebreak-back-container,
.form-all .form-pagebreak-next-container {
    font-size: 14pxpx
}

.supernova .form-all, .form-all {
    background-color: ;
    border: 1px solid transparent;
}

.form-all {
    color: #555;
}
.form-header-group .form-header {
    color: #555;
}
.form-header-group .form-subHeader {
    color: #555;
}
.form-label-top,
.form-label-left,
.form-label-right,
.form-html,
.form-checkbox-item label,
.form-radio-item label {
    color: #555;
}
.form-sub-label {
    color: #6f6f6f;
}

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        .supernova {
            background-color: lightcoral;
        }
        .supernova body {
            background: transparent;
        }

        .form-textbox,
        .form-textarea,
        .form-radio-other-input,
        .form-checkbox-other-input,
        .form-captcha input,
        .form-spinner input {
            background-color: undefined;
        }

        .supernova {
            background-image: none;
        }
        #stage {
            background-image: none;
        }

        .form-all {
            background-image: none;
        }
        /*PREFERENCES STYLE*//* __INSPECT_SEPERATOR__ */
        /* Injected CSS Code */
</style>

<script src="https://cdn.jotfor.ms/static/prototype.forms.js"
type="text/javascript"></script>
<script src="https://cdn.jotfor.ms/static/jotform.forms.js?
3.3.18119" type="text/javascript"></script>
<script type="text/javascript">
    JotForm.init(function(){
        setTimeout(function() {
            $('input_4').hint('ex: myname@example.com');
        }, 20);
        JotForm.clearFieldOnHide="disable";
        JotForm.onSubmissionError="jumpToFirstError";
    });
</script>
</head>
<body>
<form class="jotform-form" action="choirInsert.php" method="post"
accept-charset="utf-8">
    <div class="form-all">
        <ul class="form-section page-section">
            <li id="cid_1" class="form-input-wide" data-
type="control_head">
                <div class="form-header-group ">

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        <div class="header-text htal htvam">
            <h1 id="header_1" class="form-header" data-
component="header">
                Chapel Choir
            </h1>
            <div id="subHeader_1" class="form-subHeader">
                We look forward to your involvement with Campus
Ministry! Please fill out the form below.
            </div>
        </div>
    </div>
</li>
    <li class="form-line jf-required" data-
type="control_fullname" id="id_3">
        <label class="form-label form-label-top form-label-auto"
id="label_3" for="input_3">
            Full Name
            <span class="form-required">
                *
            </span>
        </label>
        <div id="cid_3" class="form-input-wide jf-required">
            <div data-wrapper-react="true">
                <span class="form-sub-label-container"
style="vertical-align:top;">
                    <input type="text" name="fname" class="form-textbox
validate[required]" size="10" value="" data-component="first" />
                    <label class="form-sub-label" for="fname"
style="min-height:13px;"> First Name </label>
                </span>
                <span class="form-sub-label-container"
style="vertical-align:top;">
                    <input type="text" name="mname" class="form-
textbox" size="10" value="" data-component="middle" />
                    <label class="form-sub-label" for="mname"
style="min-height:13px;"> Middle Name </label>
                </span>
                <span class="form-sub-label-container"
style="vertical-align:top;">
                    <input type="text" name="lname" class="form-textbox
validate[required]" size="15" value="" data-component="last" />
                    <label class="form-sub-label" for="lname"
style="min-height:13px;"> Last Name </label>
                </span>
            </div>
        </div>
    </li>
    <li class="form-line jf-required" data-
type="control_address" id="id_5">
        <label class="form-label form-label-top form-label-auto"
id="label_5" for="input_5">
            Address

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        <span class="form-required">
            *
        </span>
    </label>
    <div id="cid_5" class="form-input-wide jf-required">
        <table summary="" class="form-address-table"
cellpadding="0" cellspacing="0">
            <tbody>
                <tr>
                    <td colspan="2">
                        <span class="form-sub-label-container"
style="vertical-align:top;">
                            <input type="text" name="addr_line1"
class="form-textbox validate[required] form-address-line"
value="" data-component="address_line_1" />
                            <label class="form-sub-label"
for="addr_line1" style="min-height:13px;"> Street Address
                        </label>
                    </span>
                </td>
            </tr>
            <tr>
                <td colspan="2">
                    <span class="form-sub-label-container"
style="vertical-align:top;">
                        <input type="text" name="addr_line2"
class="form-textbox form-address-line" size="46" value="" data-
component="address_line_2" />
                        <label class="form-sub-label"
for="addr_line2" style="min-height:13px;"> Street Address Line 2
                    </label>
                </span>
            </td>
        </tr>
            <tr>
                <td colspan="2">
                    <span class="form-sub-label-container"
style="vertical-align:top;">
                        <input type="text" name="city" class="form-
textbox validate[required] form-address-city" size="21" value=""
data-component="city" />
                        <label class="form-sub-label" for="city"
style="min-height:13px;"> City </label>
                    </span>
                </td>
                <td>
                    <span class="form-sub-label-container"
style="vertical-align:top;">
                        <input type="text" name="state" class="form-
textbox validate[required] form-address-state" size="22" value=""
data-component="state" />
                        <label class="form-sub-label" for="state"

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style="min-height:13px;"> State / Province </label>
    </span>
  </td>
</tr>
<tr>
  <td width="50%">
    <span class="form-sub-label-container"
style="vertical-align:top;">
      <input type="text" name="postal" class="form-
textbox validate[required] form-address-postal" size="10"
value="" data-component="zip" />
      <label class="form-sub-label" for="postal"
style="min-height:13px;"> Postal / Zip Code </label>
    </span>
  </td>
  <td style="display:none;">
    <span class="form-sub-label-container"
style="vertical-align:top;">
      <select class="form-dropdown
validate[required] form-address-country" name="country" data-
component="country">
        <option value=""> Please Select </option>
        <option value="United States"> United
States </option>
        <option value="Afghanistan"> Afghanistan
</option>
        <option value="Albania"> Albania </option>
        <option value="Algeria"> Algeria </option>
        <option value="American Samoa"> American
Samoa </option>
        <option value="Andorra"> Andorra </option>
        <option value="Angola"> Angola </option>
        <option value="Anguilla"> Anguilla
</option>
        <option value="Antigua and Barbuda">
Antigua and Barbuda </option>
        <option value="Argentina"> Argentina
</option>
        <option value="Armenia"> Armenia </option>
        <option value="Aruba"> Aruba </option>
        <option value="Australia"> Australia
</option>
        <option value="Austria"> Austria </option>
        <option value="Azerbaijan"> Azerbaijan
</option>
        <option value="The Bahamas"> The Bahamas
</option>
        <option value="Bahrain"> Bahrain </option>
        <option value="Bangladesh"> Bangladesh
</option>
        <option value="Barbados"> Barbados
</option>

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<option value="Belarus"> Belarus </option>
<option value="Belgium"> Belgium </option>
<option value="Belize"> Belize </option>
<option value="Benin"> Benin </option>
<option value="Bermuda"> Bermuda </option>
<option value="Bhutan"> Bhutan </option>
<option value="Bolivia"> Bolivia </option>
<option value="Bosnia and Herzegovina">
Bosnia and Herzegovina </option>
<option value="Botswana"> Botswana
</option>
<option value="Brazil"> Brazil </option>
<option value="Brunei"> Brunei </option>
<option value="Bulgaria"> Bulgaria
</option>
<option value="Burkina Faso"> Burkina Faso
</option>
<option value="Burundi"> Burundi </option>
<option value="Cambodia"> Cambodia
</option>
<option value="Cameroon"> Cameroon
</option>
<option value="Canada"> Canada </option>
<option value="Cape Verde"> Cape Verde
</option>
<option value="Cayman Islands"> Cayman
Islands </option>
<option value="Central African Republic">
Central African Republic </option>
<option value="Chad"> Chad </option>
<option value="Chile"> Chile </option>
<option value="China"> China </option>
<option value="Christmas Island"> Christmas
Island </option>
<option value="Cocos (Keeling) Islands">
Cocos (Keeling) Islands </option>
<option value="Colombia"> Colombia
</option>
<option value="Comoros"> Comoros </option>
<option value="Congo"> Congo </option>
<option value="Cook Islands"> Cook Islands
</option>
<option value="Costa Rica"> Costa Rica
</option>
<option value="Cote d'Ivoire"> Cote
d'Ivoire </option>
<option value="Croatia"> Croatia </option>
<option value="Cuba"> Cuba </option>
<option value="Cyprus"> Cyprus </option>
<option value="Czech Republic"> Czech
Republic </option>
<option value="Democratic Republic of the

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Congo"> Democratic Republic of the Congo </option>
      <option value="Denmark"> Denmark </option>
      <option value="Djibouti"> Djibouti
</option>
      <option value="Dominica"> Dominica
</option>
      <option value="Dominican Republic">
Dominican Republic </option>
      <option value="Ecuador"> Ecuador </option>
      <option value="Egypt"> Egypt </option>
      <option value="El Salvador"> El Salvador
</option>
      <option value="Equatorial Guinea">
Equatorial Guinea </option>
      <option value="Eritrea"> Eritrea </option>
      <option value="Estonia"> Estonia </option>
      <option value="Ethiopia"> Ethiopia
</option>
      <option value="Falkland Islands"> Falkland
Islands </option>
      <option value="Faroe Islands"> Faroe
Islands </option>
      <option value="Fiji"> Fiji </option>
      <option value="Finland"> Finland </option>
      <option value="France"> France </option>
      <option value="French Polynesia"> French
Polynesia </option>
      <option value="Gabon"> Gabon </option>
      <option value="The Gambia"> The Gambia
</option>
      <option value="Georgia"> Georgia </option>
      <option value="Germany"> Germany </option>
      <option value="Ghana"> Ghana </option>
      <option value="Gibraltar"> Gibraltar
</option>
      <option value="Greece"> Greece </option>
      <option value="Greenland"> Greenland
</option>
      <option value="Grenada"> Grenada </option>
      <option value="Guadeloupe"> Guadeloupe
</option>
      <option value="Guam"> Guam </option>
      <option value="Guatemala"> Guatemala
</option>
      <option value="Guernsey"> Guernsey
</option>
      <option value="Guinea"> Guinea </option>
      <option value="Guinea-Bissau"> Guinea-
Bissau </option>
      <option value="Guyana"> Guyana </option>
      <option value="Haiti"> Haiti </option>
      <option value="Honduras"> Honduras

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</option>	<option value="Hong Kong"> Hong Kong
</option>	<option value="Hungary"> Hungary </option>
	<option value="Iceland"> Iceland </option>
	<option value="India"> India </option>
	<option value="Indonesia"> Indonesia
</option>	<option value="Iran"> Iran </option>
	<option value="Iraq"> Iraq </option>
	<option value="Ireland"> Ireland </option>
	<option value="Israel"> Israel </option>
	<option value="Italy"> Italy </option>
	<option value="Jamaica"> Jamaica </option>
	<option value="Japan"> Japan </option>
	<option value="Jersey"> Jersey </option>
	<option value="Jordan"> Jordan </option>
	<option value="Kazakhstan"> Kazakhstan
</option>	<option value="Kenya"> Kenya </option>
	<option value="Kiribati"> Kiribati
</option>	
	<option value="North Korea"> North Korea
</option>	
	<option value="South Korea"> South Korea
</option>	
	<option value="Kosovo"> Kosovo </option>
	<option value="Kuwait"> Kuwait </option>
	<option value="Kyrgyzstan"> Kyrgyzstan
</option>	<option value="Laos"> Laos </option>
	<option value="Latvia"> Latvia </option>
	<option value="Lebanon"> Lebanon </option>
	<option value="Lesotho"> Lesotho </option>
	<option value="Liberia"> Liberia </option>
	<option value="Libya"> Libya </option>
	<option value="Liechtenstein">
Liechtenstein </option>	
	<option value="Lithuania"> Lithuania
</option>	
	<option value="Luxembourg"> Luxembourg
</option>	
	<option value="Macau"> Macau </option>
	<option value="Macedonia"> Macedonia
</option>	
	<option value="Madagascar"> Madagascar
</option>	
	<option value="Malawi"> Malawi </option>
	<option value="Malaysia"> Malaysia
</option>	
	<option value="Maldives"> Maldives
</option>	

	<option value="Mali"> Mali </option>
	<option value="Malta"> Malta </option>
	<option value="Marshall Islands"> Marshall
Islands </option>	
</option>	<option value="Martinique"> Martinique
</option>	<option value="Mauritania"> Mauritania
</option>	<option value="Mauritius"> Mauritius
	<option value="Mayotte"> Mayotte </option>
	<option value="Mexico"> Mexico </option>
	<option value="Micronesia"> Micronesia
</option>	
	<option value="Moldova"> Moldova </option>
	<option value="Monaco"> Monaco </option>
	<option value="Mongolia"> Mongolia
</option>	
</option>	<option value="Montenegro"> Montenegro
</option>	<option value="Montserrat"> Montserrat
	<option value="Morocco"> Morocco </option>
	<option value="Mozambique"> Mozambique
</option>	
	<option value="Myanmar"> Myanmar </option>
Karabakh </option>	<option value="Nagorno-Karabakh"> Nagorno-
	<option value="Namibia"> Namibia </option>
	<option value="Nauru"> Nauru </option>
	<option value="Nepal"> Nepal </option>
	<option value="Netherlands"> Netherlands
</option>	
	<option value="Netherlands Antilles">
Netherlands Antilles </option>	</option>
	<option value="New Caledonia"> New
Caledonia </option>	
</option>	<option value="New Zealand"> New Zealand
</option>	<option value="Nicaragua"> Nicaragua
	<option value="Niger"> Niger </option>
	<option value="Nigeria"> Nigeria </option>
	<option value="Niue"> Niue </option>
	<option value="Norfolk Island"> Norfolk
Island </option>	
	<option value="Turkish Republic of Northern
Cyprus"> Turkish Republic of Northern Cyprus </option>	
	<option value="Northern Mariana"> Northern
Mariana </option>	
	<option value="Norway"> Norway </option>
	<option value="Oman"> Oman </option>

	<option value="Pakistan"> Pakistan
</option>	
	<option value="Palau"> Palau </option>
	<option value="Palestine"> Palestine
</option>	
	<option value="Panama"> Panama </option>
	<option value="Papua New Guinea"> Papua New
Guinea </option>	
	<option value="Paraguay"> Paraguay
</option>	
	<option value="Peru"> Peru </option>
	<option value="Philippines"> Philippines
</option>	
	<option value="Pitcairn Islands"> Pitcairn
Islands </option>	
	<option value="Poland"> Poland </option>
	<option value="Portugal"> Portugal
</option>	
	<option value="Puerto Rico"> Puerto Rico
</option>	
	<option value="Qatar"> Qatar </option>
	<option value="Republic of the Congo">
Republic of the Congo </option>	
	<option value="Romania"> Romania </option>
	<option value="Russia"> Russia </option>
	<option value="Rwanda"> Rwanda </option>
	<option value="Saint Barthelemy"> Saint
Barthelemy </option>	
	<option value="Saint Helena"> Saint Helena
</option>	
	<option value="Saint Kitts and Nevis">
Saint Kitts and Nevis </option>	
	<option value="Saint Lucia"> Saint Lucia
</option>	
	<option value="Saint Martin"> Saint Martin
</option>	
	<option value="Saint Pierre and Miquelon">
Saint Pierre and Miquelon </option>	
	<option value="Saint Vincent and the
Grenadines"> Saint Vincent and the Grenadines </option>	
	<option value="Samoa"> Samoa </option>
	<option value="San Marino"> San Marino
</option>	
	<option value="Sao Tome and Principe"> Sao
Tome and Principe </option>	
	<option value="Saudi Arabia"> Saudi Arabia
</option>	
	<option value="Senegal"> Senegal </option>
	<option value="Serbia"> Serbia </option>
	<option value="Seychelles"> Seychelles
</option>	
	<option value="Sierra Leone"> Sierra Leone

</option>	<option value="Singapore"> Singapore
</option>	<option value="Slovakia"> Slovakia
</option>	<option value="Slovenia"> Slovenia
</option>	<option value="Solomon Islands"> Solomon
Islands </option>	<option value="Somalia"> Somalia </option>
	<option value="Somaliland"> Somaliland
</option>	<option value="South Africa"> South Africa
</option>	<option value="South Ossetia"> South
Ossetia </option>	<option value="South Sudan"> South Sudan
</option>	<option value="Spain"> Spain </option>
	<option value="Sri Lanka"> Sri Lanka
</option>	<option value="Sudan"> Sudan </option>
	<option value="Suriname"> Suriname
</option>	<option value="Svalbard"> Svalbard
</option>	<option value="Swaziland"> Swaziland
</option>	<option value="Sweden"> Sweden </option>
	<option value="Switzerland"> Switzerland
</option>	<option value="Syria"> Syria </option>
	<option value="Taiwan"> Taiwan </option>
	<option value="Tajikistan"> Tajikistan
</option>	<option value="Tanzania"> Tanzania
</option>	<option value="Thailand"> Thailand
</option>	<option value="Timor-Leste"> Timor-Leste
</option>	<option value="Togo"> Togo </option>
	<option value="Tokelau"> Tokelau </option>
	<option value="Tonga"> Tonga </option>
	<option value="Transnistria Pridnestrovie">
Transnistria Pridnestrovie </option>	<option value="Trinidad and Tobago">
Trinidad and Tobago </option>	<option value="Tristan da Cunha"> Tristan
da Cunha </option>	<option value="Tunisia"> Tunisia </option>
	<option value="Turkey"> Turkey </option>

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        <option value="Turkmenistan"> Turkmenistan
    </option>
        <option value="Turks and Caicos Islands">
Turks and Caicos Islands </option>
        <option value="Tuvalu"> Tuvalu </option>
        <option value="Uganda"> Uganda </option>
        <option value="Ukraine"> Ukraine </option>
        <option value="United Arab Emirates">
United Arab Emirates </option>
        <option value="United Kingdom"> United
Kingdom </option>
        <option value="Uruguay"> Uruguay </option>
        <option value="Uzbekistan"> Uzbekistan
    </option>
        <option value="Vanuatu"> Vanuatu </option>
        <option value="Vatican City"> Vatican City
    </option>
        <option value="Venezuela"> Venezuela
    </option>
        <option value="Vietnam"> Vietnam </option>
        <option value="British Virgin Islands">
British Virgin Islands </option>
        <option value="Isle of Man"> Isle of Man
    </option>
        <option value="US Virgin Islands"> US
Virgin Islands </option>
        <option value="Wallis and Futuna"> Wallis
and Futuna </option>
        <option value="Western Sahara"> Western
Sahara </option>
        <option value="Yemen"> Yemen </option>
        <option value="Zambia"> Zambia </option>
        <option value="Zimbabwe"> Zimbabwe
    </option>
        <option value="other"> Other </option>
    </select>
    <label class="form-sub-label" for="country"
style="min-height:13px;"> Country </label>
    </span>
    </td>
    </tr>
    </tbody>
    </table>
    </div>
    </li>
    <li class="form-line jf-required" data-
type="control_textbox" id="id_21">
        <label class="form-label form-label-top form-label-auto"
for="classYear">
            Class Year
        <span class="form-required">
            *

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        </span>
    </label>
    <div id="cid_21" class="form-input-wide jf-required">
        <input type="text" name="classYear" data-type="input-
textbox" class="form-textbox validate[required]" size="20"
value="" data-component="textbox" />
    </div>
</li>
<li class="form-line jf-required" data-type="control_phone"
id="id_6">
    <label class="form-label form-label-top form-label-auto"
id="label_6" for="input_6">
        Phone Number
        <span class="form-required">
            *
        </span>
    </label>
    <div id="cid_6" class="form-input-wide jf-required">
        <div data-wrapper-react="true">
            <span class="form-sub-label-container"
style="vertical-align:top;">
                <input type="tel" name="area" class="form-textbox
validate[required]" size="3" value="" data-component="areaCode"
/>

                <span class="phone-separate">
                    Å -
                </span>
                <label class="form-sub-label" for="area"
style="min-height:13px;"> Area Code </label>
            </span>
            <span class="form-sub-label-container"
style="vertical-align:top;">
                <input type="tel" name="phone" class="form-textbox
validate[required]" size="8" value="" data-component="phone" />
                <label class="form-sub-label" for="phone"
style="min-height:13px;"> Phone Number </label>
            </span>
        </div>
    </div>
</li>
<li class="form-line jf-required" data-type="control_email"
id="id_4">
    <label class="form-label form-label-top form-label-auto"
id="label_4" for="input_4">
        E-mail
        <span class="form-required">
            *
        </span>
    </label>
    <div id="cid_4" class="form-input-wide jf-required">
        <input type="email" name="email" class="form-textbox
validate[required, Email]" size="30" value="" placeholder="ex:

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myname@example.com" data-component="email" />
    </div>
  </li>
  <li class="form-line" data-type="control_dropdown" id="id_
22">
    <label class="form-label form-label-top form-label-auto"
for="cexp"> Do you have any previous choral experience? </label>
    <div id="cid_22" class="form-input-wide jf-required">
      <select class="form-dropdown" name="cexp"
style="width:150px;" data-component="dropdown">
        <option value=""> </option>
        <option value="None Selected"> None Selected
</option>
        <option value="Yes"> Yes </option>
        <option value="No"> No </option>
        <option selected="" value=""> </option>
      </select>
    </div>
  </li>
  <li class="form-line" data-type="control_dropdown" id="id_
23">
    <label class="form-label form-label-top form-label-auto"
for="vp"> Voice Part? </label>
    <div id="cid_23" class="form-input-wide jf-required">
      <select class="form-dropdown" name="vp"
style="width:150px;" data-component="dropdown">
        <option value=""> </option>
        <option value="None Selected"> None Selected
</option>
        <option value="S"> S </option>
        <option value="T"> T </option>
        <option value="A"> A </option>
        <option value="B"> B </option>
      </select>
    </div>
  </li>
  <li class="form-line" data-type="control_textarea" id="id_
24">
    <label class="form-label form-label-top form-label-auto"
for="instrument"> Instruments(s) </label>
    <div id="cid_24" class="form-input-wide jf-required">
      <textarea class="form-textarea" name="instruments"
cols="60" rows="1" data-component="textarea"></textarea>
    </div>
  </li>
  <li class="form-line" data-type="control_dropdown" id="id_
25">
    <label class="form-label form-label-top form-label-auto"
for="rmusic"> Can you read music? </label>
    <div id="cid_25" class="form-input-wide jf-required">
      <select class="form-dropdown" name="rmusic"
style="width:150px;" data-component="dropdown">

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        <option value=""> </option>
        <option value="None Selected"> None Selected
</option>
        <option value="Yes"> Yes </option>
        <option value="No"> No </option>
    </select>
</div>
</li>
<li class="form-line" data-type="control_radio" id="id_26">
    <label class="form-label form-label-top form-label-auto"
for="cantor"> Are you a Cantor? </label>
    <div id="cid_26" class="form-input-wide jf-required">
        <div class="form-single-column" data-component="radio">
            <span class="form-radio-item" style="clear:left;">
                <span class="dragger-item">
                    <input type="radio" class="form-radio"
name="cantor" value="Yes" />
                    <label for="cantor"> Yes </label>
                </span>
                <span class="form-radio-item" style="clear:left;">
                    <span class="dragger-item">
                        <input type="radio" class="form-radio"
name="cantor" value="No" />
                        <label for="cantor"> No </label>
                    </span>
                </div>
            </div>
        </div>
    </li>
<li class="form-line jf-required" data-
type="control_textbox" id="id_27">
    <label class="form-label form-label-top form-label-auto"
for="folderNo">
        Folder No:
        <span class="form-required">
            *
        </span>
    </label>
    <div id="cid_27" class="form-input-wide jf-required">
        <input type="text" name="folderNo" data-type="input-
textbox" class="form-textbox validate[required]" size="20"
value="" data-component="textbox" />
    </div>
</li>
<li class="form-line" data-type="control_button" id="id_2">
    <div id="cid_2" class="form-input-wide">
        <div style="margin-left:156px;" class="form-buttons-
wrapper">
            <button id="input_2" type="submit" class="form-
submit-button" data-component="button">
                Submit Form

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        </button>
    </div>
</div>
</li>
<li style="display:none">
    Should be Empty:
    <input type="text" name="website" value="" />
</li>
</ul>
</div>
<input type="hidden" id="simple_spc" name="simple_spc"
value="70878085966172" />
<script type="text/javascript">
    document.getElementById("si" + "mple" + "_spc").value =
"70878085966172-70878085966172";
</script>
</form></body>
</html>
<script type="text/javascript">JotForm.ownerView=true;</script>

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