



**C.C.S. SINGERS MEMBERSHIP REGISTRATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ SPOUSE/PARTNER'S NAME: \_\_\_\_\_

VOICE PART: \_\_\_\_\_ BIRTHDAY (month/day) \_\_\_\_\_

OCCUPATION or IF RETIRED, WHAT WAS PREVIOUS POSITION:  
\_\_\_\_\_

I CAN HELP IN THE FOLLOWING AREAS, INDICATE WITH CHECK MARK OR CIRCLE:

Accounting/Finance	Computer Input	Historian	Publicity
Ad Layout	Data Base	Mailings	Recruitment
Ad Sales	Concert Set-Up	Marketing	Rehearsal Set-up
Art Work/Calligraphy	Fund Raising	Membership	Set Design
Hospitality	Grants	Outreach/Scholarship	Telephone coverage
Other	Ticket Sales		

I play the following musical instruments: \_\_\_\_\_

I am interested in serving on the CCS Committee(s):  
\_\_\_\_\_

Please list individuals or businesses that may be potential sponsors or Board members for CCS:  
\_\_\_\_\_

Please list any friends or contacts associated with the media:  
\_\_\_\_\_

Please print your name as you would like it to appear in the concert program:  
\_\_\_\_\_

Do you need a name badge: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please print name you would like on the badge:  
\_\_\_\_\_