

Manassas Chorale Registration – 2024-2025 Season

Name: _____ Height: _____

Segment Joining (circle one): Fall Winter Voices Spring Voice Part: _____

Returning members – if all contact information is the same, please skip down to Dues section.

Email (PRINT): _____

Street Address: _____

City: _____ Zip: _____

Primary Phone: _____

DUES:

I am an adult singer
Dues = \$136

I am a high school singer
Dues = \$100

I am paying in full

I am paying in installments*

I am interested in
scholarship aid*

**These options require arrangements with the Treasurer*

DEMOGRAPHIC INFORMATION: optional but vital in support of our grant requests

Age: teens 20s 30s 40s 50s
 60s 70s 80s and up

Ethnicity: Asian Black/African-American Caucasian
 Hispanic/Latino Native American Pacific Islander
 Other

I would like to Opt IN Opt OUT of a Manassas Chorale member directory (names, addresses, emails) to be provided to Chorale members only for the sole purpose of in-group communication.

I have read, understand, and agree to abide by the policies in the Manassas Chorale Handbook. The Manassas Chorale has my permission to use my name and/or photo in connection with publicity for the organization.

(signature) _____