

2012 New Member Application Form

PLEASE PRINT:

Date: _____

New Membership: _____ **Single \$40** _____ **Couple \$75** (same address)

Name: (First, Middle Initial, Last) _____

Spouse's (or Other) Name: _____

Street Address: _____

City: _____ **St:** _____ **Zip Code** _____

Phone: () _____ **Email:** _____

The 2012 membership year runs from January 1-December 31, 2012

Permanent Resident? _____ Yes _____ No

If no, dates at Florida Address: From _____ To _____

Are you a Musician interested in playing at the jam sessions? _____ Yes _____ No

What Instrument (s)? _____

Make check payable to: **Charlotte County Jazz Society, Inc.** (A non-profit organization)

Mailing Address: Charlotte County Jazz Society
P.O. Box 495321
Port Charlotte, Fl 33949-5321

If you are interested in becoming a board member or volunteering to help at concerts, please call our hotline at (941) 766-9422. Visit our web site at www.ccjazz.org

Become a CCJS supporter:

Hipster: (\$15-\$49) _____ Bopper: (\$50-\$99) _____ Cool Cat: (\$100-\$249) _____

Big Band Swinger: (\$250-\$499) _____ Avant-Garde: (\$500 up) _____

Dues and Donations are tax deductible per schedule 501 (c)(3)

In Office Use: Check# _____ Date received: _____ Amount: _____ Initials: _____