



### MEMBERSHIP APPLICATION

New  Renewal (effective to June 30, 2011)

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

As a service to its members, WCAMS makes member contact lists available within the Society. Please check this box if you DO NOT want your contact information (including e-mail address) circulated to other members.

#### YOUR INTERESTS:

Instrument(s):

_____	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Professional
_____	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Professional
_____	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Professional
_____	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Professional

Voice:  Soprano  Alto  Tenor  Bass

Supporting

(Please list family members and their interests on separate forms.)

MEMBERSHIP FEES (yearly):	Individual	\$30
	Student / Senior	\$15
	Family	\$50
	Affiliated group, no library privileges	\$45
	Affiliated group, with library privileges - \$45 for leader and \$1 per member to a maximum of \$125	\$45 + \$_____ = \$_____

Please make cheque payable to WCAMS and mail with Membership Application to:

WCAMS Memberships  
c/o 1613 Elgin Road  
Victoria, BC V8R 5L5

Date Processed: \_\_\_\_\_