

CORNISH FEDERATION OF MALE VOICE CHOIRS

www.fed-cornishchoirs.org.uk

ASSOCIATE MEMBERSHIP APPLICATION FORM

NAME OF CHOIR:

WEBSITE (if applicable):

VENUE FOR PRACTICE:

DAY OF PRACTICE: **TIME:**

MUSICAL DIRECTOR: Title: First name:

Surname:

Address:

..... Postcode:

Tel: Email:

CHAIRMAN: Title: First name:

Surname:

Address:

..... Postcode:

Tel: Email:

TREASURER: Title: First name:

Surname:

Address:

..... Postcode:

Tel: Email:

SECRETARY: Title: First name:
Surname:
Address:
..... Postcode:
Tel: Email:

FEDERATION REPRESENTATIVE:

(1) Title: First name: Surname:
Address:
..... Postcode:
Tel: Email:

NUMBER OF CHOIR MEMBERS PER SECTION:

1st Tenor: **2nd Tenor:**
Baritone: **Bass:**

TOTAL CHORISTERS IN CHOIR:

Membership fees are due annually in April and are reviewed at the AGM. The fees are currently £20 pa.

PLEASE COMPLETE & PRINT THIS FORM then post it, with cheque for appropriate amount* to:

Penny Higman, Secretary, Cornish Federation of Male Voice Choirs
35 The Sycamores
Trevarthian
St Austell PL25 4BH

Tel: (01726) 252099.

Email: prh_10@hotmail.co.uk

* Cheques made payable to **The Cornish Federation of Male Voice Choirs**