



Voices of Musica Sacra
New Member Information

Membership Chair	___
Roster	___
President	___
Treasurer	___
Section Leader	___
Music Director	___

Dear New Member:

Welcome to VMS! Please fill out the information requested below and return this form to Sue Cevasco, President. *(This information is treated confidentially, and is only used for choir business.)*

Please print all info clearly!

Music No.: _____ Date: _____

Name: _____

Address: _____

Home Phone: (____) _____ Work Phone: (____) _____

Fax: (____) _____ Cell phone: (____) _____

E-mail: _____@_____
(we communicate with our members via email on a regular basis)

Voice Part: *(circle voice part assigned by the Music Director)*

Sop 1 Sop 2 Alto 1 Alto 2 Tenor 1 Tenor 2 Bass 1 Bass 2

Please tell us how you heard about VMS auditions and/or the chorus?
(to help us to better direct our advertising)

- VMS chorus member: _____
- Attended a previous VMS concert Flyer
- Craigslist.com S.F. Classical Voice website
- ChorusConcert.info website Astound TV cable ad
- Newspaper item in: _____
- Online news website: _____
- Church bulletin/newsletter: *church:* _____ *city:* _____
- Radio station broadcast or website: _____
- Posted at college/school: _____
- Other: _____