Sound Investment Community Choir Application Form

Name	
Phone (if a returning member, complete only if changed)	
Email address (if a returning member, complete only if changed)	
Mailing address (if a returning members, complete only if changed)	

Voice type (check any relevant)

☐ soprano 1 ☐ soprano 2 ☐ alto 1 ☐ alto 2 ☐ tenor ☐ bass ☐ don't know

If not sure, we'll help you determine your best placement.

Other Creative or Artistic Interests

For upcoming concerts, we plan to include additional artistic, literary or musical elements. Do you,or a family member or friend, have something you would like to contribute, for example a poem, musical instrument, artwork or crafts for display? Let us know, and we'll get back to you.

Member Expectations

I am aware that:

- ☐ As member of SICC I am expected to sell tickets for the concerts in which I am participating.
- ☐ In the absence of extenuating circumstances or illness, I am expected to miss no more than two practices in the fall season, and three in the spring season.

Signature _____

Date _____

Office Use Only

Dues Received	***Type of Payment***	***Board Member Initials***
Fall $100____		
Spring $100____		
Year $200____		

Version September 5, 2024