

## CCC Registration Form 15-16

Name: \_\_\_\_\_ Years in Chorale: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

Part to Sing: \_\_\_\_\_

- S1    S2
- A1    A2
- T1    T2
- B1    B2

Do you Read Music:

- Yes
- Bass Clef
- Treble Clef
- Both

Do you play any instruments?  
\_\_\_\_\_

Would you serve on the Board  
or a Committee?

- Yes Serve on Board
- No Serve on Board
- Yes Serve on Committee
- No Serve on Committee
- Help with Grants

Other Comments: \_\_\_\_\_