

# DACORUM COMMUNITY CHOIR

## APPLICATION FOR MEMBERSHIP

Please complete and return to the Membership Secretary

Dacorum Community Choir maintains an electronic mailing list for our own use only. **This information will not be disclosed to any other outside organisation.**

Please tick here if you **DO NOT** wish your details to be stored electronically by us.

**(Remember that if you choose this option, you may not be kept up-to-date with information relating to choir events or rehearsals.)**

**I would like to join Dacorum Community Choir:**

Name (*please print*) .....

Address .....

.....

..... Post Code .....

Tel. No. .... Mobile No. ....

Email (*please print clearly*) .....

.....

Voice (if known)    Soprano                  Alto                  Tenor                  Bass (*please circle*)

How did you hear about us?

Emergency contact details:

Age range (optional but helpful)

Under 40                  40-60                  over 60 (*please circle*)

**Lift sharing:**    Would you be able to offer a lift to rehearsals on a regular basis? If so:

Which areas would you be prepared to cover?

How many seats would you have available?

**I understand that my personal data will be stored for the purposes of managing the mailing list and sharing information unless I have indicated otherwise (*see above*).**

Signed .....

Date .....