



Kingston Maennerchor and Damenchor Inc.

37 Greenkill Avenue Kingston, New York 12401

(845) 338-3763

www.nyssb.org/KMD.htm

Where Voices are Blending in Sweet Harmony

Application for Membership

Name: _____ Date: _____
 Mailing Address: _____
Please Print Clearly

 Street Address: _____
 Telephone: _____ Cell Phone: _____
 E-Mail Address: _____ Occupation: _____
 Date of Birth: _____ Place of Birth: _____
 Name of Spouse *If Applicable* _____

Type of Membership

Active, Voting Member

- Singer
- Worker
- Student

Non-Active, Non-Voting Member

- Supporting
- Junior Under 18

Sponsor: _____
Please Print Name Signature Date

Trustee Review: _____
Please Print Name Signature Date

Trustee Recommendation: _____

Accepted as a Member on: _____ Dues payable within 14 days following acceptance date. Paid Dues On: _____

For purposes of children's activities, such as *Children's Christmas Party*, please complete the following:
if appropriate. Names and ages of your children or grandchildren up to their 11th year:

