



American Guild of Organists
Central Arizona Chapter

MEMBERSHIP REGISTRATION

July 1, 2010 – June 30, 2011

DUE: JUNE 30, 2010

Last Name _____ First _____

Academic Degrees & AGO Certifications _____

Area+Home Phone _____

Home Address _____

City, ST _____ Zip+4 _____

Daytime Phone _____ Home Fax _____

Cell Phone _____ Pager _____

Spouse/Partner Name _____

(Please submit separate form for Partner Membership)

Home Email Address _____

Primary Musical Position (title) _____

Work Email _____ Work Website _____

Primary Musical Employer _____

Area+Phone _____ Area+Fax _____

Address _____

City, ST _____ Zip+4 _____

Secondary Musical Position (title) _____

Secondary Musical Employer _____

Area+Phone _____ Area+Fax _____

Address (include city, state, zip+4) _____

City, ST _____ Zip+4 _____

Summer Address _____

City, ST _____ Zip+4 _____ Area+Phone _____

Church Organ (Name, Type/Model, Manuals, Ranks, Year Installed/Modified/Rebuilt) _____

Substitute organist Substitute director Substitute organist/director Organ teacher Piano teacher

I am available as a SUNDAY Organist Director Organist/director Soloist: S A T B

I prefer to receive the Pipeline at my Home address Church address

I'd like to offer my help with: Bulk Mailing Membership Hospitality Telephoning

Event Photographer Publicity Education Marathon Recitals Writing Pipeline Articles

Chapter Program planning Pipeline Editor Hosting a chapter meeting at my: Church Home

A school residency Pipe Organ Encounter A Pedals, Pipes & Pizza Program for school children

I wish the Nominating Committee would remember me next spring.

I wish CAZAGO would have a program on _____

❖ MEMBERSHIP FEES ❖

Voting Membership:

- | | | | |
|--------------------------|---|------------------------------------|---------|
| <input type="checkbox"/> | Regular | (\$37 local + \$55 national) | \$92.00 |
| <input type="checkbox"/> | Special [over 65, under 21 or disabled] | (\$29.50 local + \$37.50 national) | \$67.00 |
| <input type="checkbox"/> | Full-time Student [with school ID] | (\$13 local + \$24 national) | \$37.00 |
| <input type="checkbox"/> | Partner [second member at same address, no TAO] | (\$37 local + \$30 national) | \$67.00 |
| <input type="checkbox"/> | Dual [2nd chapter] primary chapter _____ | (\$36 local + \$ 0 national) | \$36.00 |
| <input type="checkbox"/> | Student dual - primary chapter _____ | (\$15 local + \$ 0 national) | \$15.00 |

Non-Voting Membership: [chapter mailings and affiliation, no TAO]

- | | | |
|--------------------------|----------------|---------|
| <input type="checkbox"/> | Chapter Friend | \$25.00 |
|--------------------------|----------------|---------|

❖ SPONSORSHIPS ❖

PROGRAMS/RECITALS and/or SCHOLARSHIPS

En Chamade \$500 & up	Grand Jeu \$250 – \$499
Plein Jeu \$100 – \$249	Plenum \$50 – \$99
Petit Jeu \$25 – \$49	Celeste \$Up to \$24

I/we prefer my/our gift to be anonymous.

Please list my/our name(s) as follows: _____

[Write name(s) above as you want them to appear in Yearbook and Program recognition.]

Membership Fee(s)	\$ _____
Program/Recital Series Contribution	\$ _____
Organ Scholarship Fund Contribution	\$ _____
Yearbook Postage	\$ <u>1.00</u>
Total Amount of Check Enclosed	\$ _____

Return this form with your check (payable to CAZAGO) to:

Judy Riden, Registrar-Membership Chair
 Central Arizona Chapter AGO
 621 East Geneva Drive
 Tempe, AZ 85282-3734

For Office Use Only

Membership Category _____ Membership Fee _____ Check # _____ Dated _____ Rec'd. _____

Contributions: Recital \$ _____ Scholarship \$ _____ Yearbook \$ _____ Total \$ _____

Sponsor Name(s) _____ Anonymous

