



MEMBERSHIP FORM

DATE: _____ Membership is current for a full year after dues are paid.

NAME _____

STREET: _____ CITY _____ PROV ____ POSTAL CODE _____

Landline _____ CELL: _____ EMAIL: _____

WOULD YOU LIKE THE NEWSLETTER/CALENDAR EMAILED TO YOU 6 times per year? CIRCLE . . . YES or NO

EMERGENCY CONTACT INFO: _____

Any medical information you wish to share with us:

Groups You're Interested In	Timing	Yes/No	INSTRUMENT(S) I PLAYED IN THIS GROUP:
Jazz Improv	Tu 11-12 am	Yes/No	
Ukulele Lessons (Beginner Uke)	Tu 4-4:45	Yes/No	
Ukulelians (Performance Group)	Tu 5-6:30	Yes/No	
Moodswing Chorus	Tu 7-9	Yes/No	
Each-One-Teach-One Catch-Up Class	We 10-10:55	Yes/No	
Beginner Band Lessons	Wed 11-11:55	Yes/No	
Skills Band Lessons	We 12-1	Yes/No	
Fundamentals	We 1-3	Yes/No	
Eclectics	We 3:30-5:30	Yes/No	
Community Concerts	Th 6:30-7:15	Yes/No	
Moodswing Orchestra	Th 7:30-9:00	Yes/No	
Haywires Country Band	Fri 2-4	Yes/No	
Minds at Work (R & B)	Fri 4-6	Yes/No	
Mental Pride Rock Band	Su 2-4	Yes/No	
Guitar Lessons	Su 4:30-5:30	Yes/No	
Open Mic	Su 6-8	Yes/No	
New program ideas?			

Would you like to volunteer with Friends of Music Society? YES _____ NO _____

What skills are you most interested in sharing? _____

When are you available? _____

MEMBERSHIP

Renewal _____ or New Membership _____

Yearly Basic Membership \$5 _____ Supporting Membership \$10 _____

Group Homes \$25 _____ Community Business / Organization \$25 _____

GENERAL DONATIONS \$ _____ Cheques, phone-in credit card

or online at CanadaHelps (please don't mail cash)



For Donations only, access FOM Music Society's Canada Helps online donation page by pointing your cell phone camera at the QR Code to the left.

The information you provide will be kept confidential

2328 Trent Street, Victoria, BC V8R 4Z3 (250) 592-5114 Email: info@friendsofmusic.ca

Up-to-date information, newsletters and calendars are available online at www.friendsofmusic.ca

FOM Music Society (dba Friends of Music) is a Registered Charity # 13285 5735 RR0001



PHOTO / VIDEO RELEASE FORM

I hereby authorize FOM Music Society (Friends of Music) and those acting on their behalf to:

1. record my likeness, voice or music playing on a video, audio, photographic, digital, electronic or any other media,
2. use my name and biographical information in connection with such recordings, and
3. use such recordings in any medium (examples, website, social media, posters, newsletter) for promotional, educational and other lawful purposes.

I release and waive any claims or rights of compensation or ownership regarding such uses and understand that all such recordings shall remain the property of FOM Music Society. I certify that I am 19 years of age or older or that a parent / guardian has signed below.

Name of participant (please print): _____

Participant signature: _____

Parent / guardian signature if participant is under 19 years of age: _____

Date: _____

Phone number: _____ Email: _____