



MEMBERSHIP APPLICATION/RENEWAL FORM

Name: _____
(first) (last)

Mailing Address: _____

City: _____ Province _____ Postal Code _____

Phone (res) _____ (bus) _____

E-mail: _____

School/organization _____

Assignment (elementary, secondary, studio, other) _____

How can the AKA support your Music teaching? _____

ANNUAL MEMBERSHIP FEES (Please check)

_____ Regular Member: \$50.00

_____ Full-time Post-Secondary Student: free
(must be enrolled full-time in a post secondary institution)
Post Secondary Institution _____
Program enrolled in _____
Graduating Year: _____

Your cheque is payable to the Alberta Kodály Association.

Please contact Melanie Armand (Registrar) at melanie.armand@epsb.ca to submit your application.

The Alberta Kodaly Association collects personal information for the sole purpose of administering membership. This process includes the use of mail and email addresses to communicate with members regarding official branch business. As a member of AKA you are also a member of the Kodaly Society of Canada and your contact information is shared with KSC in order to distribute official KSC publications to its members. If you have any questions or concerns about AKA's/KSC's privacy policies, please contact the KSC Registrar: healymart@staff.ednet.ns.ca

By providing your email address, you are consenting to receive AKA/KSC information electronically.