ANDOVER CHORAL SOCIETY

Registration Form

NEW AND FORMER MEMBERS: Please fill out everything on this sheet and bring with you to the first open rehearsal.

	New member	How did yo	ou learn about the AC	S?		
	Returning member	What year d	lid you join the ACS?			
Name:			Emai	il:		
Street:						
State: _	Zip Code:		Home Phone:		Cell:	
Current or previous occupation:				Employer: _		
Voice l	Part:Sop	rano I	Alto I	Tenor I	Bass I	
	Sop	rano II	Alto II	Tenor II	Bass II	
ACS roles I would be interested in (e.g. section leader, committees, etc.)						
Hobbies and/or interests						