



**NEW MEMBER DATA FORM**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alt. Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Best Method of Contacting You: \_\_\_\_\_

How did you hear about this group? \_\_\_\_\_

Why do you want to join this group? \_\_\_\_\_

Please list other instruments you play: \_\_\_\_\_

Have you ever been a member of a folk music group before?     Yes    No

Are you interested in joining any of the following committees?:

Festival    Board of Directors (Officers)    Fundraising/Special Events/PR

Do you agree to have your details available for viewing among the members of this group?

Yes    No   If no, please state what details, if any, you would allow for viewing to members only (ex: Name and email only) \_\_\_\_\_

**PLEASE RETURN THIS FORM TO, ALONG WITH NEW MEMBER PAYMENT OF \$25 TO:**

**Heartland Dulcimer Club, PO Box 1163  
Elizabethtown, KY 42702-1163 THANK YOU!**

**ONCE PAYMENT IS RECEIVED, YOU MAY PICK UP A BINDER OF CLUB MUSIC UPON ATTENDANCE AT NEXT CLUB MEETING**