



Worcester Chapter American Guild of Organists

MEMBERSHIP REGISTRATION & RENEWAL FORM

MEMBER INFORMATION	Last Name	First Name, MI	
	Street Address	Apartment/Unit	
	City, State ZIP	Home Phone	Cell Phone
	E-Mail Address	Work Phone	Fax

CURRENT POSITIONS	Title	Organization	City & State
	Title	Organization	City & State
	Title	Organization	City & State

Certifications/Degrees. Please list any AGO certifications or educational degrees that you would like to be listed following your name (i.e. SPC, CAGO, AAGO, FAGO, B.M., M.M., D.M.A., Ph.D.):

Substitute Services. Please indicate if you would like to be included in the Chapter's directory of substitutes by checking the appropriate categories below:

Organist
 Choir Director
 Organist & Choir Director

Membership Selection. Please select the appropriate membership selection. Please make all checks payable to Worcester Chapter AGO.

- \$92.00 Regular Voting Member
- \$67.00 Special Voting Member (*Over 65, under 21, disabled*)
- \$67.00 Partner Voting Member (*One TAO per household*)
- \$37.00 Student Voting Member (*Full-time with valid school ID*)
- \$36.00 Dual Voting Member (*Primary Chapter: _____*)
- \$15.00 Student Dual Member (*Primary Chapter: _____*)
- Chapter Friend (*Non-Voting, Minimum Donation of \$15.00*)
- Donation to Scholarship Fund (*Amount Donated: \$ _____*)

Participation. On the attached page, please complete the membership questionnaire. Indicate if you would like to serve in any of the roles listed, and please check all that apply. You will be contacted by an executive officer or the Worcester Chapter AGO to discuss some of the opportunities that are available.

Signature. Please return your signed form and registration fee to the address below.

Signature _____

Date _____

Post Office Box 20208
 Worcester, Massachusetts 01602
www.worcesterago.org



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MEMBERSHIP QUESTIONNAIRE

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If you know anyone who may be interested in joining the Worcester Chapter American Guild of Organists, please provide his/her name and contact information:

Please indicate any offices that you may be interested in holding, and/or committees on which you might be interested in serving. For a full description of each office, committee and subcommittee, refer to the Operating Procedures, Article VI, available online at www.worcesterago.org. Your interest will be very helpful to the Dean and the Executive Committee in filling available positions.

- | | |
|--|---|
| <input type="checkbox"/> Executive Committee | <input type="checkbox"/> Membership Committee |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Program Committee |
| <input type="checkbox"/> Scholarship Committee | <input type="checkbox"/> Educational Outreach Committee |

Please list any programs that you would the Worcester Chapter AGO to present (e.g. recitals, lectures, workshops, social events, etc.):

Please offer any additional feedback or comments that you may have. Attach additional sheets if necessary.
