



MEMBERSHIP APPLICATION

FIRST NAME _____ LAST NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

WORK PHONE (OPTIONAL) _____ OCCUPATION (OPTIONAL) _____

***EMAIL ADDRESS _____ (IMPORTANT FOR CONTACT)

HOW INVOLVED WOULD YOU LIKE TO BE IN THE BLUES SOCIETY? Passive 1 2 3 4 5 Active

DO YOU HAVE ANY SPECIAL SKILLS? (Musician, Artist, Writing, Technology, Public Relations, Sales, etc.) _____

WHAT WOULD YOU LIKE TO SEE THE BLUES SOCIETY ACHIEVE? _____

HOW DID YOU HEAR ABOUT MVBS? _____

LIFETIME MEMBERSHIP: \$30

- Entitles member to reduced admission fee to MVBS special events, except fundraisers
- Entitles member to reduced admission fee to monthly MVBS Jam sessions
- Entitles member to attend and participate in open MVBS meetings
- Entitles member to vote on topics and elections at open MVBS meetings

SIGNATURE: _____ DATE: _____

PLEASE RETURN APPLICATION TO AN MVBS BOARD MEMBER OR MAIL TO: **MVBS, PO BOX 207, NEW HARTFORD, NY 13413**

THANK YOU FOR JOINING MVBS AND WELCOME TO THE SOCIETY! CHECK US OUT ON FACEBOOK!

OFFICE USE ONLY: [] CASH [] CHECK # _____ RECEIVED BY: _____ DATE: _____

CREDIT CARD: MasterCard [] Visa [] # _____ Expiration Date: ____/____

MEMBERSHIP CARD ISSUED [] MEMBERSHIP CARD TO BE MAILED []