



MEMBERSHIP FORM

(One form per person**)**

New Membership Renewal

Name: _____

(Please print)

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Cell Phone: _____ E-mail: _____

Membership Badge with your name: \$8.00 *(optional)* Name on Badge: _____

Dues \$10.00 *(per person)* **Total Enclosed: \$** _____

**Please send this form along with your check payable to the EMMA Guild
(More than one form can be sent in at the same time and payable with one check)**

The EMMA Guild – Membership
PO Box 860062
Saint Augustine, FL 32086

www.EMMAconcerts.com

Office: (904) 797-2800

We warmly welcome you to participate in these Guild functions

Administrative

- Membership data entry
- Mailings
- Telephone

Hospitality

- Lobby refreshment service
- Guild meeting refreshments
- Fund raising events

Fund Raising Events

- Gala (fall)
- Spring Dinner & Dance
- Silent Auction (spring)
- Annual Guild Dinner (April)

Concerts Operations

- Ushers and Greeters
- Promotional (CD's, etc.) table

Advertising & P.R.

- Sell *Footnotes* ad space
- Photographer
- Area Ambassador

Commitment Levels

- I prefer to chair committees
- I prefer to be committee member
- I am unable to help at this time