



ChildrenSong of New Jersey, Inc.

P.O. Box 134
Haddonfield, NJ 08033
(856) 471-7664
Polly Murray, Artistic Director

Application for New Members

Today's Date: _____

Singer's Name: _____ Age: _____ 2018-19 Grade: _____

Address: _____ Birth Date: _____

City: _____ State: _____ Zip: _____

Telephone: () _____

School: _____ Parent Email: _____

Music Teacher(s) and school affiliation: _____

How were you referred to us?

- Word of Mouth
- ChildrenSong Chorister (Who? _____)
- School
- Newspaper
- Teacher
- Other: _____

Parent Information:

Names of Parent(s)/Guardian(s): _____

May we add you to our email announcement list if accepted? Yes No
(solely for director/parent communication and weekly announcements)

Occupation/Employer: (mother) _____

Occupation/Employer: (father) _____

Would your child be able to attend Monday evening rehearsals? Yes No

Would your child be able to attend monthly Saturday morning rehearsals? Yes No

If your child is involved in "extra curricular" activities, please list: _____

Please list any special interests or skills you have that could be offered to help the chorus (fundraising, graphic design, bookkeeping, Public Relations, contacts with other arts groups, etc:

Placement: Prelude Allegro Concert