



Please note: This form can be printed out at <https://www.aisgc.org/membership.html>

MEMBERSHIP REGISTRATION/RENEWAL FORM

NAME: _____

ADDRESS: _____

STATE/COUNTRY: _____ **ZIP:** _____

EMAIL: _____

DO YOU PLAY AN INSTRUMENT? YES ___ **NO** ___

IF SO, WHAT INSTRUMENT(S) DO YOU PLAY? _____

**WOULD YOU LIKE TO FURTHER DONATE TO THE AISGC TO HELP DEFRAY
OPERATING COSTS?**

Please note: Donations made above the membership level will be listed in all 2023 newsletters as well as the website in 2023.

YES ___ **NO** ___ **Donation Amount:** _____ **Donor Name(s):** _____

Membership Dues (\$25 per person): \$ _____

Donation Amount: \$ _____

Total: \$ _____

PLEASE RETURN THIS FORM WITH \$25 DUES PAYMENT TO:

**AISGC
3730 W 1400 N
Macy IN 46951**