



CALGARY FOLK ARTS COUNCIL

MEMBERSHIP APPLICATION FORM YEAR 2009

Name of Group, Organization or Individual _____

Mailing Address: (Please advise about any changes made throughout the year) _____

Cheques should be made payable to: _____

E-mail and/or Fax Number: _____

Name of Contact person: _____ E-mail: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Name of Alternative Contact person: _____ E-mail: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

To facilitate the planning of events throughout the year, please complete the following information

Cultural Community/ Country Represented: _____

Type of Performance (circle): Dance Choral Instrumental Other (specify)

Performances by (circle): Children Teenagers Adults

Season Availability to Perform (circle): Year around Only months: _____

Music type (circle): CD Live

Special Requests (i.e. Microphones, Sound) _____

Membership Fee \$15.00 / year (Cash, Cheque)

Other Comments: _____

***** Please let us know about any changes *****

Please attach a current biography including the year of foundation, previous participation and achievements, if possible

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E-mail: calfolks@telus.net