## **CSOTFA MEMBERSHIP FORM - District 7**

www.sandiegofiddler.org

Mail application and check made out to CSOTFA DISTRICT 7 to:

Renewal Month Last Name

CSOTFA DISTRICT 7, Attn: Lee Schweighauser 10836 Calle Verde APT #104 La Mesa CA 91941

Annual dues: \$20 per person (Single), (Children under 18 must register with a		, plus \$2 per child under 18 years of age.	
TYPE OF APPLICATION (select one)	[] Annual Renewal	[] New Membership	
TYPE OF MEMBERSHIP (select one)	[] Single (\$20)	[] Family (\$22 + \$2 per child)	
To request CSOTFA Badges, indicate of	quantity and add \$8.50 p	per badge: Badges	
Are you a member of another district? [	]No []Yes If so, whi	nich district(s)Home (voting) district:	_
I hereby agree to support the by-law ever remember its purpose, "to pres		fornia State Old Time Fiddlers Association and uthentic old-time fiddling."	l to
(Please print) Last Name:			
First Name:	Spous	se First Name	
Signature:			
Children Names:			
Instruments Played (select any that app [ ] Fiddle	[] Piano	[] Bass [] Listener/Fan	
Street Address:			
City:	State:	: Zip:	
Email:		Phone:	
For	CSOTFA District 7 Use	e Only	
		Date Joined:	
Signature, District 7 Membership Secre	etary		
Notes:			