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Baltimore Jazz Alliance Membership Application

First Name: _____ Last Name: _____

Address: _____

Phone: _____ email: _____

Please describe yourself (only one):

☐ Music Lover ☐ Producer/promoter

☐ Musician ☐ Club owner/manager

☐ Agent ☐ Media

☐ Other _____

Amount of contribution:

☐ $25 (basic) ☐ $100 501(c)(3) organization]

☐ $50 (sustaining) ☐ $200 (corporate)

☐ $100 (patron) ☐ $15 (student – copy of ID required)

☐ $_____ (other)

Please return this form along with your check to:

The Baltimore Jazz Alliance

847 North Howard Street

Baltimore, MD 21201

(a membership card will be mailed to you)

THANK YOU FOR JOINING! YOUR MEMBERSHIP MAKES A DIFFERENCE