



Baltimore Jazz Alliance Membership Application

First Name: _____ Last Name: _____

Address: _____

Phone: _____ Email*: _____

Please describe yourself (only one):

- G Music Lover G Producer/promoter
G Musician G Club owner/manager
G Agent G Media
G Other _____

Amount of contribution:

- G \$25 (basic) G \$100 (501(c)(3) organization)
G \$50 (sustaining) G \$200 (corporate)
G \$100 (patron) G \$15 (student – copy of ID required)
G \$_____ (other)

How did you hear about the BJA? _____

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 emailed to you, so please make sure to include this!)

THANK YOU FOR JOINING! YOUR MEMBERSHIP MAKES A DIFFERENCE