



PRO-MOZART *Society of Atlanta*

Membership Application

New Membership: Yes No

Date: _____

Primary Name: _____

Alternate Name
(for Couple Memberships) _____

Address: _____

City / State / Zip: _____

Home Phone: _____

Work Phone: _____

E-mail: _____

Volunteer interest: _____

Twelve-month Membership

(Membership year is Sept 1 – Aug 31)

For an Individual:

- Basic: \$75
- Sponsor: \$125
- Patron: \$200
- Silver Patron: \$325
- Gold Patron: \$575

For a Couple:

- Basic: \$125
- Sponsor: \$175
- Patron: \$250
- Silver Patron: \$375
- Gold Patron: \$625

For a Student:

- Basic: \$35

I wish to make an additional
contribution to the scholarship fund: \$ _____

Total Amount Enclosed: \$ _____

The Pro-Mozart Society of Atlanta is a 501(c)3 organization and dues are tax deductible to the extent permitted by law.

Return with payment to:

Judy Chandler
580 Cambridge Way
Atlanta, GA 30328