New Member _____ Returning Member Print the following information as you would like it to appear in the membership directory. List spouse if you would like his/her name included in directory. Name ______ Spouse/Partner Name _____ City _____ State __ Zip ___ Phone (H) _____ (C) _____ E-Mail ____ \$40 Individual Membership (Event not included) _____ \$50 Joint Membership (Same household) _____ \$28 Membership Event (if you wish to attend) _____ \$20 for each additional guest \$_____ TOTAL AMOUNT Please list names of guests you will bring (continue on back) _____ Please enclose check payable to UTAH SYMPHONY GUILD OR Credit Card #_____ Exp. Date _____ CSV_______ * ** * VOLUNTEER OPPORTUNITIES * * *

see separate sheet, check appropriate boxes and return with Membership Form and Payment!!*Application due by September 3, 2019

Utah Symphony Guild Attn: Chip Browne 123 W South Temple Salt Lake City UT 84101