

LIVONIA CIVIC CHORUS – a 501(c)(3) Nonprofit Charitable Organization

MEMBERSHIP APPLICATION

37637 Five Mile Road, Suite 156, Livonia Michigan 48154		
www.livoniacivicchorus.org	info@livoniacivicchorus.org	734-542-9071

FALL: SEPT-DEC	SPRING: JAN-MAY	DUES FOR SEMESTER: \$55 + MUSIC FEE (\$20)
PAYMENT: _____	CASH/RECEIPT# _____	CHECK/ CHECK # _____

LAST NAME	FIRST NAME	SPOUSE/PARTNER
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ADDRESS	CITY & ZIP CODE
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PREFERRED PHONE NUMBER	ALTERNATE PHONE	EMAIL ADDRESS
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EMERGENCY CONTACT – Name and Phone

EMPLOYER/OCCUPATION	Full Time Part-Time Retired	BIRTHDATE
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YOUR VOICE	SOPRANO 1	SOPRANO 2	ALTO	TENOR	BARITONE	BASS	UNKNOWN
New Members: Have you sung in a chorus/choir before? _____							
When/Where? _____							

Areas of Interest/Experience - Check all that Apply:			
Board Position (President, VP, Treasurer, Secretary, Librarian) _____			
Section Leader	Scholarship Committee	Historical Committee	
Membership Committee	Publicity & Social Media	Marketing	Set Design
Costuming	Movement & Choreography	Show Committee	Special Projects
Other (specify) _____			

Members of the Livonia Civic Chorus must:

1. Be at least 18 years old and pay semi-annual dues.
2. Assume responsibility for purchase of performance costumes.
3. Purchase and retain concert music (\$20 music fee).
4. Maintain weekly rehearsal attendance according to the Bylaws (COVID-related absences excepted).
5. Audition for voice placement and be invited to join by the Director.

Waiver and Assumption of Risk: In consideration of my participation in the Livonia Civic Chorus (LCC), I understand, acknowledge and accept the following:

- 1) Participation in the LCC is voluntary and does not create an employer/employee relationship.
- 2) The LCC and its officials, representatives, and volunteers, assume no responsibility for injury or harm, including any COVID-related illness or contagion, resulting from my participation in Chorus rehearsals, performances, and events. I agree to fully waive any liability against the LCC, and hold them harmless, for any injury resulting from my participation in any LCC rehearsal or event.
- 3) Permission is granted to use my likeness and voice in photographs, and video/audio recordings of the LCC performances as the LCC deems appropriate.
- 4) I accept the responsibilities and limitations of participation as provided in the Bylaws of the LCC.

Signature _____ Date _____

Livonia Civic Chorus

Member Request for Scholarship Funds

For any Livonia Civic Chorus members who wish to participate, but are experiencing financial hardships, the scholarship committee would like to provide the opportunity to request funds to defray the cost of participation. Please note that all requests will be kept confidential, and will be filled on a first come, first serve basis, as scholarship funds allow. We will consider requests at the start of each session, and let members know as soon as possible if the request has been granted.

Are you a new member to the Livonia Civic Chorus?

() Yes () No

Which session are you requesting funds for?

() Fall () Spring

Which fees would you like help with?

() Membership Fee (\$55) () Music Fee (\$20) () Both Fees (\$75) () Costuming (TBD)

Date Received: _____ Name of LCC Member: _____

Applicant Signature _____ Date _____

LCC Officer Signature _____ Date _____