



ORGANIZATION - BAND

MEMBERSHIP APPLICATION FORM

Date: -----

Band Name: -----
Required

Location: -----
Required This can be a generic region, such as Nova Scotia, Southwestern Ontario, West Coast....

Band Leader/Contact Name: -----
Required

City: ----- Province/State: ----- Country: -----
Required **Required** **Required**

Telephone Mobile: ----- Landline: -----
Required At least one reliable number required

Email: -----
Required

Website: -----
Only if you have one

		Already a Member?	
Band Members:		Y	N
1	-----	Y	N
2	-----	Y	N
3	-----	Y	N
4	-----	Y	N
5	-----	Y	N
6	-----	Y	N

Please send completed form to:

Gord DeVries - Bluegrass Canada
Membership Co-ordinator
22790 Amiens Road
Komoka ON N0L 1R0

Criteria for free Organizational Membership: ***All band members will be Grass Roots BMAC members.***
Please print a **Grass Roots Application form** for each Band member, have them fill it in and mail or email it in to the address above, with the appropriate payment.