



REGISTRATION FORM

Christmas Spring

Date Paid	_____
Check #	_____
New	Returning
Binder	Y N

Please complete the form below and bring to registration
or return with your \$35 check made payable to
WCC, Inc.
P. O. Box 7714
Woodbridge VA 22195-7714

ALL REGISTRATION FEES ARE NON-REFUNDABLE

PERSONAL INFORMATION			
NAME:			
<i>Your Name As You Want It To Appear In The Program</i>			
ADDRESS:			
<i>Street Address</i>		<i>Apartment/Unit #</i>	
<i>City</i>		<i>State</i>	<i>ZIP Code</i>
DAYTIME PHONE:		EVENING PHONE:	
E-MAIL ADDRESS:			
VOICE PART			
SOPRANO <input type="checkbox"/>	ALTO <input type="checkbox"/>	TENOR <input type="checkbox"/>	BASS <input type="checkbox"/>
EMERGENCY CONTACT INFORMATION			
NAME:			
PRIMARY PHONE:		ALTERNATE PHONE:	
RELATIONSHIP:			
How Did You Hear About the Choir			

Special Offer

The Woodbridge Community Choir Board of Directors wants to offer a way to reduce or eliminate your registration fee. For each new member you bring to register your registration fee is reduced by \$10; up to a maximum of \$35. If you bring new members after the third rehearsal, the reduction is applied to the following season registration. So, bring your friends and neighbors to join the Woodbridge Community Choir.

PHOTO RELEASE FORM

The Woodbridge Community Choir has my permission to use my photograph publically to promote the choir. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall be payable to me by reason of such use.

Signature: _____ Date: _____