

Year \_\_\_\_\_

**The Harmony Club of the St. John's District  
Of  
Florida Federation of Music Clubs**

(please check one)

\_\_\_\_\_ New Member: Please complete entire form.

\_\_\_\_\_ Current Member: Please make any changes or additional information requested and sign at the bottom.

Please enclose a check made payable to The Harmony Club in the amount of \$20.00.

Mail to: Lisa Smith (Membership)  
3774 Barbizon Circle S.  
Jacksonville, FL 32257

Dr./Mr./ Mrs./ Ms./ Miss \_\_\_\_\_

(Please print your name as you wish it to appear in the Roster)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

E mail: \_\_\_\_\_

Area (1) you want listed where you teach \_\_\_\_\_

Junior Club Name: \_\_\_\_\_ Year you joined Federation \_\_\_\_\_

List below the instruments/classes you want listed in roster.

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\_\_\_\_\_ Check here to be published on the web site directory.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Ck. # \_\_\_\_\_