



MEMBERSHIP FORM 2014

www.caboma.org

ANNUAL DUES:

- Individual and Family \$40

Make check payable to CABOMA and mail with this form to:

**CABOMA
10304 Ten-Ten Road
Raleigh, NC 27603**

The following information will be used for any mailings to you, and for the CABOMA membership directory, so **PLEASE PRINT CLEARLY**.

If you do not want your name included in the directory, check here: _____

Name(s): _____

Address: _____

City, State, ZIP: _____

Phone (w/area code): Home _____ Cell _____

E-Mail Address(es): _____

| | | |
|------------|---------------------------|--------------------------|
| I am a: | I play these instruments: | I play with these bands: |
| ___ Fan | _____ | _____ |
| ___ Singer | _____ | _____ |
| ___ Picker | _____ | _____ |

Note: CABOMA is an all-volunteer organization. Please check any of the following functions that you are willing to perform to help our organization:

| | |
|----------------------------------|----------------------------------|
| ___ making telephone calls | ___ helping to produce a concert |
| ___ leading or hosting a jam | ___ desktop publishing |
| ___ helping open/close jam venue | ___ conducting a workshop |
| ___ serving on a committee | ___ _____ (other) |

If you are a new member, WELCOME. Please use this space to tell us how you learned about us: