



(Legal name: Gesang-Verein Frohsinn)

Application for Membership

Name: _____

(Print) First Middle Last Nickname

Address: _____

No. Street City State Zip Code

Home Phone: _____

Cell Phone: _____

Email address: _____

XX

Date Paid: _____ Check # _____

Date accepted: _____

Board Member Taking application: _____

Please make out your check to Frohsinn Club and bring to any dance or mail to:

Frohsinn Club c/o Judy Karkane
97 Page St.
Lunenburg, Ma 01462