Clare Bluegrass Association

Membership Application Form

Full Name: _____

_____

Mailing Address: _____

_____

_____

Telephone Number: _____

Email Address: _____

Do you play a musical instrument? (Not mandatory for membership)

_____

Memberships are only $10 per person.
Our fiscal year is January 1st to December 31st.

To become a member please print & complete this form then mail with membership fees to:

Clare Bluegrass Association
PO Box 103,
Meteghan Centre, N.S.
B0W 2K0