



Membership Application & Renewal Form

Membership Status:	<input type="checkbox"/> New	<input type="checkbox"/> Renewal
Membership Type:	<input type="checkbox"/> One Year	<input type="checkbox"/> Lifetime
Name:		
Street / P.O. Box:		
City:		
State:		
Zip Code:		
Telephone:		
E-Mail Address:		
Be A Volunteer?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Best Time To Call?:		
Desired Musician(s)?:		

\$25 (1 Year) Or \$100 (Lifetime)

Paid: _____ Credit Card _____ Cash _____ Check # _____

Mail this form with your check payable to:

The Santa Barbara Blues Society
P.O. Box 30853
Santa Barbara, CA 93130