

Date _____

REQUEST FOR PROSPECTIVE STATUS FROM A FORMER CHAPTER

Former chapter name: _____

Number of members: _____ Number of prospects: _____

Rehearsal day and time: _____

Rehearsal Location (include address): _____

Summary of your group's activities: _____

Director's musical background: _____

Contact _____

ID # (if known) _____

Address _____

City _____

State _____

Postal Code _____

Country _____

E-mail _____

Home Phone _____

Alternate Phone _____

Fax _____

Director _____

ID # (if known) _____

Address _____

City _____

State _____

Postal Code _____

Country _____

E-mail _____

Home Phone _____

Alternate Phone _____

Fax _____

Include area or city code, home, work and fax numbers.

Please submit with your first \$25.00 charter fee installment to:

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