

Application for Membership

Data For Guild Files Minimum Age--18 years

Rejoining Member: Yes()No()			
New Member: Yes()No()			
Name: (Dr., Mr., Mrs., Ms.)			
			Home Phone:()
			Work Phone:()
			Email Address:
			Audition Center (or nearest metropolitan area):
Please complete the above data carefully. Additional information: Piano study with: Where studied and degree (if any):			
Number of years teaching piano:			
I herewith apply for active membership in the National Guild for the 2017 fiscal year, ending June 30th thereof, for which I am enclosing the USA annual dues of \$80.00 (Canada & Mexico \$90.00; Foreign \$105.00).			
I have read the privileges of Guild members as published in the Guild Syllabus.			
Signed:			
Mail to: National Guild of Pione Teachers			

National Guild of Piano Teachers Teacher Division of The American College of Musicians P.O. Box 1807 Austin, Texas 78767-1807

Rejoining Members: Please indicate name under which previous membership appeared:		
New Members: I have been referred by:		