



**Catholic Community of Pleasanton**  
*Adult Choir / Cantor / Instrumentalist*  
**Registration Form**

Circle one: new / returning

Circle all that apply: Instrumentalist, Choir Member, Cantor, Admin., Tech.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Your Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Today's Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Home Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Do you play a Musical instrument? Y / N. If so what Instrument \_\_\_\_\_ # of Years? \_\_\_\_\_

Have you sung in a Choir previously? Y / N. If so, what choir? \_\_\_\_\_ # of Years? \_\_\_\_\_

Have you had private instruction? Y / N. If so what what type \_\_\_\_\_ # of Years? \_\_\_\_\_

Do you have Special Conditions /Allergies/Comments \_\_\_\_\_

Emergency Contact First name \_\_\_\_\_ Emergency Contact Last name \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

I wish to participate in the following support role(s)

*Please see "Role discriptions" link for details pertaining to each role.*

- Refreshments/Social Events  Cantor Coordinator  Recruitment  Seasonal Attire/Dress Code   
 Assistant Director  Music Planning  Set-up/Breakdown  Communications Coordinator   
 Cantor Coordinator  Project Management  Section Captain   
 Music Librarian  Archivist  Wedding Music Coordinator  Desktop Publishing  Data Entry   
 Sound / Tech  Web / Social Networking  Other  \_\_\_\_\_

I understand that as Ministers of Music, we need to hear the Gospel, experience conversion, profess faith in Christ, and so proclaim the praise of God. Thus, we who serve the Church at prayer are not merely volunteers. We are ministers who share the faith, serve the community, and express the love of God and neighbor through music. STL:mdw #49.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ***Additional Participant***

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Your Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Today's Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

School \_\_\_\_\_

Do you play a Musical instrument? Y / N. If so what Instrument \_\_\_\_\_ # of Years? \_\_\_\_\_

Home Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Health Insurance Provider \_\_\_\_\_ Group/Policy Number: \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Dentist's Phone: \_\_\_\_\_

Special Conditions / Allergies / Comments \_\_\_\_\_

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## ***Additional Participant Role Participation***

Parent/Guardian First name \_\_\_\_\_ Parent/Guardian Last name \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

I wish to participate in the following support role(s)

- Refreshments/Social Events  Cantor Coordinator  Recruitment  Seasonal Attire/Dress Code   
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Cantor Coordinator  Project Management  Section Captain   
Music Librarian  Archivist  Wedding Music Coordinator  Desktop Publishing  Data Entry   
Sound / Tech  Web / Social Netwknng  Other  \_\_\_\_\_
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Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_