



*The Florida Orchestra Guild  
of St. Petersburg, Inc.*

**MEMBERSHIP APPLICATION**

**NAME** \_\_\_\_\_  
Last Name First Name

**DUAL NAME (If applicable)** \_\_\_\_\_

**STREET ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PHONE\_(Indicate if Home or Cell)** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**DUAL EMAIL (If applicable)** \_\_\_\_\_

**WHAT ARE YOUR INTERESTS AS A GUILD VOLUNTEER?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Dues are renewable by June 1<sup>st</sup> annually  
Single: **\$50.00 or \$60.00** with a Name Badge  
Dual: **\$80 or \$100** with Name Badges

Make check payable to:

**THE FLORIDA ORCHESTRA GUILD**

And mail to:

Lois Ancona • 1501 Doyle Carlton Drive, #210 • Tampa, FL 33602  
For more information, call or text 703-909-2063