



American Recorder Society
 1129 Ruth Dr.
 St. Louis MO 63122-1019

Phone: 314-966-4082
 Fax: 314-966-4649
 TollFree: 800-491-9588

ars.recorder@americanrecorder.org
www.americanrecorder.org

APPLICATION

Name:

Address:

Phone:

City/State/ Postal Code:

Email:

Country:

Dual Membership*:

(Indicate other name
 or alternate address information)

I am or have been a member of the ARS: Yes / No

Your Chapter or Consort(s): _____

Are you your Chapter's ARS Representative? Yes / No

Are you your Consort's ARS Representative? Yes / No

Please check all that apply:

___ **Do NOT list** my name in the ARS online directory

___ **Do NOT release** my name for recorder related mailings

___ **Do NOT release** my email address for anything

___ **Do NOT contact** me via e-mail

We do not share any information about any ARS member with any outside business or individual, unless the ARS member is a contact person for a chapter or consort; is listed as a teacher; or has otherwise authorized us to release their information. Musical festivals, chapters, workshops and music/instrument vendors are examples of groups or businesses that may request our membership list.

Demographic Information

(Optional information collected only to enhance ARS services and provide statistics to grant makers All information on members' activities in the ARS files is strictly confidential and only used internally)

Your age: Under 21 (21-30) (31-40) (41-50) (51-60) (61-70) (71+)

Are you a Professional Recorder Performer? Yes / No

I wish to be included in the list of **Recorder Teachers** on the website. *(If you don't check this, you won't be listed!)*

Student level:	<input type="checkbox"/> Children	<input type="checkbox"/> High School Youth	<input type="checkbox"/> College Students	<input type="checkbox"/> Adults	
Playing level:	<input type="checkbox"/> Beginners	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Pre-Professional	
Class Types:	<input type="checkbox"/> Individuals	<input type="checkbox"/> Children's Classes	<input type="checkbox"/> Adult Classes	<input type="checkbox"/> Ensembles	
Where I Teach:	<input type="checkbox"/> Music Studio	<input type="checkbox"/> Public or private school	<input type="checkbox"/> Community Music School	<input type="checkbox"/> College	Other :
Certifications:	<input type="checkbox"/> Suzuki	<input type="checkbox"/> Orff	<input type="checkbox"/> Kodaly		



MEMBERSHIP PAYMENT INFORMATION

*Make payment in U.S. funds drawn on a U.S. bank payable to AMERICAN RECORDER SOCIETY, INC.,
No International Money Orders, or wire transfers please due to the \$20 charge by bank!*

SILVER Membership

US/Canadian - **\$45** one year/**\$80** two years (save \$10)
 Foreign - **\$55** one year/**\$100** two years (save \$10)

Additional Benefits

- Education Level Discounts on Sibelius & Finale Music Notation Software
- **10%** ARS Store Discount

Dual **\$5** - Dual Other Name or Other Address:
Family members residing at the same address may share a non-student membership. For an additional listing under different surnames at the same address, or dual addresses (summer/winter, home/school, etc.) add \$5 to your membership amount.

GOLD Membership

US/Canadian - **\$150** (\$91 is tax deductible)

Additional Benefits

- Free 2GB ARS Thumb Drive
- Free Hotteterre Pin
- Education Level Discounts on Sibelius & Finale Music Notation Software
- **15%** ARS Store Discount

PLATINUM Lifetime Membership

U.S./Canadian - **\$800 Loyalty*** rate (\$600 is tax deductible)

Additional Benefits

- Free ARS T-Shirt
- Free 2GB ARS Thumb Drive
- Free Hotteterre Pin
- Education Level Discounts on Sibelius & Finale Music Notation Software
- **20%** ARS Store Discount

**For members who have maintained membership for 5*

consecutive years.

STUDENT Membership (attach proof)

U.S./Canadian student - **\$25**
 Foreign student - **\$30**

BUSINESS Membership - \$125

WORKSHOP Membership - \$65

\$ _____ **Membership amount**

\$ _____ **+ Tax deductible contribution**

\$ _____ **= TOTAL**

Circle one: VISA MasterCard AMEX Discover

Card #: _____

Signature of cardholder: _____

Expiration Date: _____

CLEARLY PRINT NAME as it appears on Card:

Renew online

- **Renew by fax**
- **Renew by phone**
- **Renew by mail**