

**FRIENDS OF THE HENDERSONVILLE SYMPHONY**

**2022-2023 MEMBERSHIP COMMITMENT**

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

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

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

**PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

***We request each member serve on at least one of the Friends’ committees. Please designate your choice below.***

**I wish to serve on the following committee(s) this year:**

**□ Concert Hosts committee**

**□ Special events planning committee**

**□ Administrative / office committee**

**□ Membership recruitment / retention committee**

**□ No preference (will serve where needed most)**

Please return this form and dues payment to

HENDERSONVILLE SYMPHONY, PO Box 1811

Hendersonville, NC 28793

Thank you for your continued support of YOUR Symphony!!!