

# PSALM Membership & Product Order Form

Membership Type: \_\_\_\_\_

**REQUIRED INFORMATION**

Name \_\_\_\_\_

Billing address \_\_\_\_\_

Shipping address (if different) \_\_\_\_\_

Phone \_\_\_\_\_ Today's date \_\_\_\_\_

E-mail \_\_\_\_\_

**OPTIONAL INFORMATION**

Parish \_\_\_\_\_

Parish city/state \_\_\_\_\_

Jurisdiction \_\_\_\_\_

\_\_\_ Choir Director \_\_\_ Clergy \_\_\_ Music Instructor

\_\_\_ Asst. Choir Director \_\_\_ Monastic \_\_\_ Scholar/Academic

\_\_\_ Chanter/Psaltoi \_\_\_ Composer \_\_\_ Student: \_\_\_\_\_

\_\_\_ Choir Member \_\_\_ Editor/Arranger \_\_\_ Other: \_\_\_\_\_

May we include you on our bulk e-mail communication list? Y\_\_\_ N\_\_\_

May we list your information in the PSALM directory? Y\_\_\_ N\_\_\_

Gift Membership Type: \_\_\_\_\_

**REQUIRED INFORMATION**

Recipient's name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Today's date \_\_\_\_\_

E-mail \_\_\_\_\_

Donor's name \_\_\_\_\_

Donor's address \_\_\_\_\_

**OPTIONAL INFORMATION**

Parish \_\_\_\_\_

Parish city/state \_\_\_\_\_

Jurisdiction \_\_\_\_\_

\_\_\_ Choir Director \_\_\_ Clergy \_\_\_ Music Instructor

\_\_\_ Asst. Choir Director \_\_\_ Monastic \_\_\_ Scholar/Academic

\_\_\_ Chanter/Psaltoi \_\_\_ Composer \_\_\_ Student: \_\_\_\_\_

\_\_\_ Choir Member \_\_\_ Editor/Arranger \_\_\_ Other: \_\_\_\_\_

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May we list your information in the PSALM directory? Y\_\_\_ N\_\_\_

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