

MONTANA ROCKIES BLUEGRASS ASSOCIATION

Membership Application

Date _____

Last Name _____ First Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone #: _____ E-mail: _____

Individual (\$10.00) ____ Family (\$15.00) ____

Add a donation to our Scholarship Fund to introduce kids to Bluegrass (optional) \$ _____

Do you want the newsletter delivered electronically? _____ YES _____ NO

Renewal _____ New Member _____

Please make out your check to MRBA for the total amount.
(Membership fee + Optional Scholarship donation.)

Mail your application and dues to:

MRBA

PO Box 1306

Missoula, MT 59806