

# Arranger Certification Program Application

Name \_\_\_\_\_ Membership # \_\_\_\_\_

Chapter Name \_\_\_\_\_ Region # \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_

Zip \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

## Sweet Adelines International Experience

- |   |   |
|---|---|
| <input type="checkbox"/> Chorus Director/Co-director  | <input type="checkbox"/> International Faculty    |
| <input type="checkbox"/> Associate/Assistant Director | <input type="checkbox"/> Judge (Category - _____) |
| <input type="checkbox"/> Section Leader               | <input type="checkbox"/> Quartet Member           |
| <input type="checkbox"/> Regional Leader              | <input type="checkbox"/> Quartet Coach            |
| <input type="checkbox"/> Arranger                     | <input type="checkbox"/> Chorus Coach             |
| <input type="checkbox"/> Other                        |   |

## Musical Background

Formal education:

\_\_\_\_\_

Other musical training:

\_\_\_\_\_

Barbershop experience outside Sweet Adelines International:

\_\_\_\_\_

Please list membership in other musical organizations (e.g., NAFME, ACDA, NATS): \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete and return this application to international headquarters, along with the **\$100 application fee** by check, money order (U.S. funds) payable to Sweet Adelines International. (This fee is non-refundable and non-transferrable.)

**PLEASE NOTE:** The application fee to enroll in the Arranger Certification Program **does not** include the Arranger Guide which can be purchased through SA sales.

For credit card sales please call rather than send card information through email.

Sweet Adelines International • 9110 S. Toledo Ave. • Tulsa, Oklahoma 74137  
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**For office use only**

Date processed: \_\_\_\_\_