



## YOUTH AFFILIATE CHORUS APPLICATION

Please submit this application, along with the \$155 USD Affiliate Membership Fee, to [member@sweetadelines.com](mailto:member@sweetadelines.com).

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

### Director Information

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a current Sweet Adelines member? \_\_\_\_\_

How did you hear about the Youth Affiliate Chorus program? \_\_\_\_\_

### School Information

Name of school: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Name of chorus (if applicable): \_\_\_\_\_

Number of students in chorus: \_\_\_\_\_

Liability insurance provider:\* \_\_\_\_\_

---

### ***TO THE INTERNATIONAL BOARD OF DIRECTORS, SWEET ADELINES INTERNATIONAL:***

I, the undersigned choral/music director of \_\_\_\_\_ (school name), hereby apply for membership for \_\_\_\_\_ (chorus name) as a **Youth Affiliate Chorus** of Sweet Adelines International, which will abide by the Sweet Adelines International Code of Conduct.\*\*

### **Signatures**

\_\_\_\_\_

(Chorus Director)

\_\_\_\_\_

(School Official)

**TO BE FILLED IN AT HEADQUARTERS OFFICE)**

Application received: \_\_\_\_\_

Requirements met: \_\_\_\_\_

Referred to Board: \_\_\_\_\_

Approved by Board: \_\_\_\_\_

Affiliation granted: \_\_\_\_\_

Mailed to Chorus Director: \_\_\_\_\_

\*Liability insurance is available for purchase upon request if necessary. Liability insurance is required.

\*\*Youth Affiliate Choruses are not required to adhere to Sweet Adelines's Corporate Bylaws.