



# American Guild of Organists Central Florida Chapter

2016-2017 Membership Form

Your membership for the 2016-2017 year. Your dues include a one-year subscription to The American Organist Magazine (TAO) and support for the programs run by the national organization and by our local chapter. To continue receiving the benefits of membership and your TAO subscription, please mail your dues payment now to:

- Membership Renewal  
 New Member Application

Make Checks Payable to: **Central Florida AGO**  
Mail to:  
**Ken Stoops**  
**186 Underhill Loop Dr.**  
**Orlando FL 32825**

Name \_\_\_\_\_

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

Address \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

FAX \_\_\_\_\_

Job Title \_\_\_\_\_

Church or Business: \_\_\_\_\_

Name \_\_\_\_\_

Work e-mail Address \_\_\_\_\_

Address \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

FAX \_\_\_\_\_

Do you teach organ?  Yes  No

If you select any category in *Voting Membership* and are available to substitute, indicate those that apply:

Chapter Supply:  Worship Services  Weddings  Funerals

Please check areas of expertise

- O = Organist  
 A = Associate or Assistant  
 C = Director  
 H – Handbells  
 Fl – Flutist  
 V – Vocalist

Please check your correct AGO certification, if any

- FAGO = Fellow  
 AAGO = Associate  
 CAGO = Colleague  
 ChM = Choirmaster  
 SVPIC = Service Playing Certificate

Membership Category (check one) Amount Due Amount Paid

**Voting Membership**

Regular \$100.00 \$ \_\_\_\_\_

Special \$75.00 \$ \_\_\_\_\_  
(Over 65, under 21 or disabled)

Student \$40.00 \$ \_\_\_\_\_  
(Full-time with valid school I.D.)

Partner  
(2nd member at same address, no TAO)  
2nd Member \$75.00 \$ \_\_\_\_\_

Dual \$39.00 \$ \_\_\_\_\_  
(Paid to 2nd Chapter)

Primary Chapter \_\_\_\_\_  
 Student Dual Member \$13.00 \$ \_\_\_\_\_

**Non-Voting Membership**

Chapter Friend (no TAO) \$40.00 \$ \_\_\_\_\_

**Tax Deductible CFAGO Scholarship Fund** \$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

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

By signing this form, you agree to abide by the [Code of Ethics](#) of the American Guild of Organists

Note: This form may be completed, scanned and attached to an email to the Registrar: [schaunard.todesco@gmail.com](mailto:schaunard.todesco@gmail.com).