

Hartford Music Teachers Alliance

"Where Students come First"

HMTA Membership Form

Date Submitted _____



1. Name _____
(As you would like it to appear on the website)

2. Street _____ City/ ZIP _____

3. Are you a new member? YES: _____ *Welcome!* NO: _____

4. Telephone Number _____ E-mail Address _____
website if applicable: _____

Phone number, email and website url are published on HMTA site. If you would rather not have them made public, please check here: _____

5. Teaching Field(s) _____

6. Primary Teaching Situation (Check all that apply)

____ Independent ____ College ____ Elementary/Secondary School
____ Community Music School ____ Collegiate Member

7. Membership Fee: _____ \$50 (check payable to HMTA)

Donation to Students Fund (optional) _____ \$ _____ *Thank you!*

Signature Date

Mail to: Malgosia Lis
Membership, Hartford Music Teachers Alliance
95 Ballard Drive
West Hartford, CT 06119