



ST. LOUIS AOSA

A registered chapter of the American Orff-Schulwerk Association

Please return this form (complete **both** pages) during the next AOSA meeting or mail to: *Bridget Zimmermann, 400 Lynwood Forest Dr., Manchester, MO 63021*
For more information, e-mail St. Louis AOSA President: **president@stlaosa.org**

PLEASE PRINT

Last Name _____ First Name _____

Home Address _____ City _____

State _____ Zip _____ Phone (____) _____

Is this a new address? (circle one) YES NO

E-Mail _____ District _____

School _____ Phone (____) _____

**Are you Orff certified? (circle one) YES NO **Level 1 2 3

Please check the items below which pertain to you:

- | | | |
|---------------------------|----------------------------|------------------------------|
| _____ Music Specialist | _____ Church Musician | _____ Student |
| _____ Classroom Teacher | _____ University Personnel | _____ Other (please specify) |
| _____ Administrator | _____ Music Therapist | _____ |
| _____ PE/Movement Teacher | _____ Industry | |

During the past year/summer, did you attend other workshops or certification courses?
If so, what and where?

MEMBERSHIP

- \$20.00 St. Louis AOSA membership**
- \$20.00 member workshop fee (pd. at each individual workshop)**
- \$80.00 St. Louis AOSA membership / six 2009-2010 workshops**
(savings of \$40.00 – must be pre-paid in August or September)
- \$25.00 workshop fee for non-member**

Were you a member of St. Louis AOSA last year? (2008-2009) YES NO
 Are you a National AOSA member? (2009-2010) YES NO

DO NOT WRITE BELOW THIS LINE

St. Louis AOSA - Local Dues \$_____ New Member ____ Returning Member ____ Non Member ____
 Pre-paid Workshop Series \$_____ (Must be pd. in Aug. or Sept.) TOTAL \$_____



VOLUNTEER FORM

St. Louis AOSA would not be possible if it were not for the generous donations of time and talent from all our chapter members. Thank you for taking this opportunity to let our chapter know of your interests and the gifts you have to share!

PLEASE PRINT

Last Name _____ First Name _____

I may be interested in:

____ Serving as an officer for St. Louis AOSA (please check all that apply)

____ President ____ Vice-President ____ Secretary ____ Treasurer ____ Editor

____ Serving as a Member At Large for St. Louis AOSA (please check all that apply)

____ Associate Treasurer ____ Hospitality Coordinator ____ Member At Large
____ Historian ____ Membership/Recruitment ____ Fundraising
____ College Credit Coordinator ____ E-Mail Coordinator ____ Website Development
____ Instrumentarium Coordinator ____ Travel Coordinator ____ Other _____

I would like to help by:

____ arriving early to set up the instrumentarium ____ mailing postcards for meetings
____ hosting clinicians in my home ____ being a "buddy" for new AOSA members
____ hosting AOSA members from out of town ____ sending Evites for meetings
____ bringing a snack for the meeting break ____ other _____
____ assisting with the 2012 National Conference

I am interested in presenting a workshop for St. Louis AOSA: YES / NO

Topic of workshop: _____

Please tell us about any other interests or talents you may be willing to share.

What ideas and suggestions do you have for St. Louis AOSA?

THANKS in advance for your gift of time and talent to St. Louis AOSA. We look forward to seeing you throughout the year!!