



**ABS Alumni Association**  
**Membership Registration Form**

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Name (as you wish it to appear in print) Grad Year

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Email

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Street Address

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City/State/Zip

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Home Phone Cell Phone

**NOTE: Dues to the ABS Alumni Association are not a donation to The American Boychoir School**  
**Membership Dues are waived for the first year after Graduation**

Membership Dues \_\_\_ x \$35.00 \$ \_\_\_\_\_

Membership Dues for Member  
of the Alumni Chorus \_\_\_ x \$25.00 \$ \_\_\_\_\_

Membership Dues for students \_\_\_ x \$25.00 \$ \_\_\_\_\_

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Name of Institution (if a student)

Contribution to The American Boychoir School \$ \_\_\_\_\_

**Total Amount Enclosed** **\$ \_\_\_\_\_**

Make checks payable to The ABS Alumni Association or for credit card payment:  VISA  MasterCard

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Name (as it appears on card)

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Card # Exp. Date

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Signature

**Goals of the Alumni Association**

We want to know how The American Boychoir School Alumni Association can better serve the alumni community. Please rate six Alumni Association goals in importance to you, **1 for the highest through 6 through the lowest**

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|--|---|
| ___ Connecting again with your fellow alums          | ___ Alumni Events around ABS Concerts                     |
| ___ Electronic version of Alumni NOTES               | ___ Funding of the preservation of the history of CBS/ABS |
| ___ Professional networking (a.k.a. Career Database) | ___ Other (Please explain in the space below)             |
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