

# MEMBERSHIP APPLICATION

## Yellowstone Bluegrass Association

P.O. Box 23143, Billings, Montana 59104

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Check One: Individual (\$20.00) \_\_\_\_\_ Family (\$30.00) \_\_\_\_\_

Instruments Played \_\_\_\_\_

Dates of Interest for Calendar \_\_\_\_\_