



GOSPEL MUSIC WORKSHOP OF AMERICA DETROIT CHAPTER

2018 CHAPTER REGISTRATION FORM

Iris A. Taylor, Ph.D., Chapter Chairwoman

FIRST NAME: <small>*REQUIRED</small>	LAST NAME: <small>*REQUIRED</small>
ADDRESS: <small>*REQUIRED</small>	CITY/STATE/ZIP: <small>*REQUIRED</small>
BIRTHDATE: (____/____/____) <small>*REQUIRED</small> <small>MTH</small> <small>DAY</small>	PHONE: (____)(____-____) (____)(____-____) <small>HOME</small> <small>*REQUIRED—MOBILE</small>
CHURCH AFFILIATION:	PASTOR:
EMAIL: <small>*REQUIRED PLEASE BE SURE TO CHECK THE SPAM FOR OUR MONTHLY NEWSLETTERS</small>	

Break-out components of GMWA are listed below. Please fill in the box or boxes of components you plan to participate in.

<input type="checkbox"/> 1 st Soprano	<input type="checkbox"/> Soprano	<input type="checkbox"/> Alto	<input type="checkbox"/> Tenor
<input type="checkbox"/> Baritone/Bass	<input type="checkbox"/> Soloist	<input type="checkbox"/> Men's Ministry	<input type="checkbox"/> Women's Ministry
<input type="checkbox"/> Evangelistic Board	<input type="checkbox"/> Nurse's Guild	<input type="checkbox"/> Usher's Guild	<input type="checkbox"/> Security
<input type="checkbox"/> Youth (under 21)	<input type="checkbox"/> Contemp. Adult (21 – 35)	<input type="checkbox"/> Senior (over 60)	<input type="checkbox"/> Musician (instrument) _____