

# FRIENDS OF OPERA SARATOGA

## Membership Form (mail this form)



Our membership year runs from January 1 to December 31 of the current year.  
Dues are \$20 per year.

Amount enclosed is: \$\_\_\_\_\_

Please make checks payable to: Friends of Opera Saratoga

Mail check along with this membership form to:  
**Friends of Opera Saratoga**  
**P.O. Box 3554, Saratoga Springs, NY 12866**

Name\_\_\_\_\_

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

State\_\_\_\_\_ Zip\_\_\_\_\_ Phone\_\_\_\_\_ Email\_\_\_\_\_

I would like to volunteer for: ( ) concession stand ( ) mailings  
( ) artist transportation ( ) programs ( ) Pasta & Puccini  
( ) artist hospitality ( ) public relations ( ) wherever I can

I prefer to have CANTABILE sent by ( ) mail or ( ) email