



MEMBERSHIP FORM

Tri-State Bluegrass Association
30374 County Road 237, Kahoka, MO 63445
660-341-3762
tsbabluegrass@gmail.com www.tsbafestivals.org

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

Please check what applies: (Return check & form to above address).

- RENEWAL 2019 Membership, (\$20)
- RECEIVED 2018 BLUEBOOK, Paying Membership (\$20)
- PAYING PAST DUE MEMBERSHIP FOR 2017 (\$20)
- SEND 2018 BLUEBOOK, (after December 2017, enclose total of \$27.00)

TEMPORARY WINTER ADDRESS: (SNOWBIRDS ONLY) if you will be away from your PERMANENT ADDRESS during the month of December, please provide this address for the book to be mailed to you.

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

Please Enter Dates Leaving & Returning To Permanent Address:

DEPARTURE _____ RETURN _____

Thank you for supporting TSBA - to keep BLUEGRASS, OLD-TIME & TRADITIONAL Music Alive & Growing!

When you become a MEMBER you will receive the BLUEBOOK each year. If payment is not made prior to receiving the book, an invoice will be included for you to send payment.

Please send notification if you wish to cancel membership and stop receiving the BLUEBOOK.