

# OPERA VOLUNTEERS

I N T E R N A T I O N A L

## 2021-2022 GROUP MEMBERSHIP

### MEMBERSHIP DUES:

More than fifty members or more than 3 years in existence \_\_\_\_\_ \$100  
Fewer than fifty members or established less than 3 years ago \_\_\_\_\_ 50  
Chapter, affiliate, or satellite of \$100-member group \_\_\_\_\_ 50  
University or school of music, or related support group \_\_\_\_\_ 50

Please Circle

OVI is a 501(c) (3) non-profit organization. Contributions are tax-deductible as allowed by the tax code in your country.

**MEMBERSHIP BENEFITS:** *Eligibility for matching grants, awards and other recognition; OVI publications; newsletter, directory, and invitations for primary, secondary and company/school contacts.*

- 1) Join online at [operavolunteers.org/Join/Renew/OVI](http://operavolunteers.org/Join/Renew/OVI) --OR--
- 2) Complete form and send with check made payable to **Opera Volunteers International** to:

**OPERA VOLUNTEERS INTERNATIONAL**  
**Sheila McNeill, Treasurer**  
**17402 Poppleton Avenue**  
**Omaha, NE 68130**

### PLEASE PRINT

DATE \_\_\_\_\_

Group Name \_\_\_\_\_

Year founded \_\_\_\_\_ Number of members \_\_\_\_\_ Company/School \_\_\_\_\_

Group Website \_\_\_\_\_

Primary Contact\* (e.g., President/head) \_\_\_\_\_ Term ends (M/Y) \_\_\_\_\_

(\*Name will appear in annual Membership Directory unless otherwise requested)

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Day phone \_\_\_\_\_ Evening phone \_\_\_\_\_

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

Please provide an email address so that we may send the newsletter and provide periodic updates regarding opera and volunteerism. OVI will not give away, trade, or sell your email address to any individual or company.

Secondary Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Day phone \_\_\_\_\_ Evening phone \_\_\_\_\_

E-mail \_\_\_\_\_

Company/School Contact Name and Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_