



QUARTET REGISTRATION RENEWAL FORM

QUARTET REGISTRY, Barbershop Harmony Society
110 7th Avenue N
Nashville, TN 37203-3704
615-823-3993 FAX 615-313-7619
quartet@barbershop.org

Please fill out this form **completely**. Enclose a remittance of \$40.00 Annual Registration Fee (U.S. Funds only). The fee is payable by check, MasterCard or Visa and may be mailed to address above, or register/renew on line at www.barbershop.org/

NEW QUARTET REGISTRATION

First Choice _____
All names must be approved by the Society Office District in Which Quartet

Second Choice _____
Intends to Compete

Third Choice _____

CONTACT MAN

(name) (membership number)

(address) (city, state, postal code/zip)

(home phone number) (work phone number) (fax phone number)

(e-mail address) (quartet e-mail address) (quartet web -site address)

QUARTET PERSONNEL

Tenor	_____	Member #	_____
Lead	_____	Member #	_____
Bari	_____	Member #	_____
Bass	_____	Member #	_____

QUARTET RENEWAL

Quartet Name _____ Quartet No. _____

PAYMENT INFORMATION

MasterCard/Visa _____ Exp. Date _____

Name/membership # _____ Amount _____

Please be aware of the following:

- All members of the quartet must be enrolled on the membership records at the Society Office. (If a membership is questionable the contact man will be notified.)
- To assure there will be no duplication of a quartet name with any other registered quartets, **ALL** names must be approved by the Society Office.
- The contact man will be sent a registration packet after the above requirements are met and verified.
- **THIS FORM MUST BE COMPLETELY FILLED OUT, OR IT WILL BE RETURNED.**