



OPERA COMPANIONS MEMBERSHIP AND VOLUNTEER FORM 2018-2019 Season

Please complete this form and mail with check for your dues to:

OPERA COMPANIONS
200 North Davie Street • Box 17
Greensboro, North Carolina 27401

Name _____
(Please legibly print your name as you would like it to appear in the 2018-2019 Yearbook)

Address _____

City _____ State _____ Zip _____

Phone (H) _____ Phone (C) _____

Email _____

ANNUAL DUES
\$25 Individual _____
\$35 Couple _____
Additional Contribution \$ _____
TOTAL ENCLOSED: \$ _____

PLEASE SELECT ANY OF THE AREAS IN WHICH YOU WOULD LIKE TO PARTICIPATE:

GENERAL OFFICE HELP: *Various times during the year*

EVENT PLANNERS AND ASSISTANTS: *Special events take place throughout the year*

____ FOOD: Provide and serve food (baking or buying) for events as needed

____ MAN POWER: Setting up, cleaning up, moving and shaking

EDUCATION: OPERA AT THE CAROLINA

____ Ushering for morning performances

HOST COMPANIONS MEETING IN YOUR HOME: _____ YES _____ NO

Arrangements and refreshments are provided by event planners. Your home will only serve as the location

For planning purposes, do you have a piano? _____ YES _____ NO

Please submit this form with check for your dues.