

HAGERSTOWN  
COMMUNITY CONCERT  
ASSOCIATION

2009-2010 SEASON MEMBERSHIP

New

Renewal

PLEASE PRINT

Name \_\_\_\_\_

Street \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

SEASON MEMBERSHIPS

Number

\_\_\_\_\_ Adult..... \$45.00 \_\_\_\_\_

\_\_\_\_\_ Student..... \$10.00 \_\_\_\_\_

\_\_\_\_\_ Family(One Adult & School Age Children & Grand Children)..... \$55.00 \_\_\_\_\_

**Total** .....

**We Need Your Tax Deductible Contributions**

**Your name will appear in the program**

Sustaining.....\$20.00 \_\_\_\_\_

Patron.....\$40.00 \_\_\_\_\_

Sponsor.....\$75.00 \_\_\_\_\_

Benefactor.....\$100.00 \_\_\_\_\_

**Total Enclosed** .....

Please complete this form and mail with check payable to Hagerstown Community  
Concert Association, P.O. Box 851, Hagerstown, Maryland 21741-0851