



* Rocky Mountain Chapter American Theatre Organ Society *

Membership Application

Make checks payable to: **RMCATOS**

Send to: Ryan Kroll

1978 Buena Vista Pl

Loveland, CO 80538

Name _____

Address _____

City, State & Zip _____

Phone: _____

Dues Are: \$15
per household
(January to January)

↑ Enter above the name and address for your membership.

Additional Optional Data if you have an E-mail address:

E-mail address: _____

((If you answer "NO" to both of these questions, you will receive the newsletter via the US mail only))

Do you want an e-mail copy & a regular mail copy of the newsletter? Yes ___ No ___

Do you want an e-mail copy only (no mail copy) of the newsletter? Yes ___ No ___

(For e-mail newsletters, it is best if you have a broadband (fast) internet connection)

RMCATOS



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With your membership you will be receiving a personalized name badge and lanyard you can use at organization socials and events.

Please enter the name(s) you would like to have on your badge(s)

First name on the
← top line,
Last name on the
← second line.

Comments: _____