

MISSISSIPPI GULF COAST BLUES COMMISSION, INC.

POST OFFICE BOX 1129, GAUTIER, MS 39553



APPLICATION FOR SUSTAINING / ASSOCIATE MEMBERSHIP

	Name:				
,	Address:				
(City:	State:	Zip:		
I	Home Phone:	Cell:			
I	Email:				
ļ	Employer:				
I	Employer Address: Employer Phone: Name of Next of Kin or Nearest Relative:				
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ı					
I	Relative contact informat	ion:			
	MEMBEF	RSHIP CATEGORY - F	PLEASE CHECK () ONE:	
SUSTA	AINING MEMBER (lifetime	e member + voting r	ights):	_ (ANNUAL FI	EE OF \$500.00)
	ASSOCIATE MEMBER	SHIP:(A	NNUAL MEMBE	ERSHIP FEE O	F \$50.00)
	(Both membership categories entitle one free entry into the Annual Festival and one invite to an Annual Social Event.)				
	APPLICANT'S SIGNATURE: DATE:				
	Recruited by Blues Commissioner's Name:				
l	Make Check to:	Mississippi Gulf Coa P.O. Box Gautier, MS	1129	ission or MGC	ВС

For additional information, please contact:
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