



Southeastern Federation of Greek Orthodox Choirs and Musicians

2017 STEWARDSHIP FORM

We encourage each choir to become a steward of the Federation.
There is an Individual Stewardship option if your choir is NOT a member of the federation!

This includes clergy, choir directors and choir members, chanters, music educators, religious education teachers and interested others.

We welcome yearly stewardships from choirs, chanters, or individuals interested in maintaining an independent membership. **THANK YOU!**

PLEASE PRINT CLEARLY in INK

I.) Select Category of Membership:

| | | |
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| <p>CHURCH SPONSORED ORGANIZATION (Suggested minimum contribution to maintain SFGOCM ministries: \$100.00)</p> <p><input type="checkbox"/> Church Choir</p> <p><input type="checkbox"/> Chant Group</p> <p><input type="checkbox"/> Other: _____</p> | OR | <p>INDIVIDUAL MEMBERSHIP (Suggested minimum contribution to maintain SFGOCM ministries: \$10.00)</p> <p>_____</p> <p style="text-align: center;">Print Name</p> <p><input type="checkbox"/> Choir Director <input type="checkbox"/> Psalter/Chanter</p> <p><input type="checkbox"/> Choir Member <input type="checkbox"/> Clergy</p> <p><input type="checkbox"/> Organist <input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Organist/Director</p> <p><input type="checkbox"/> Jr. Choir Director</p> |
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II.) Contact Information

Name of Home Parish: _____ Metropolis of: _____

Address: _____

City: _____ State: _____ Zip: _____

Parish Phone: (____) _____ Home Phone: (____) _____ Cell: (____) _____

E-mail: _____ Fax: (____) _____

AMOUNT OF YOUR STEWARDSHIP CONTRIBUTION FOR THIS YEAR: \$ _____

May we include your name in our: Membership Directory? Yes No
Federation email list? Yes No

Your Signature: _____ Date: _____

Please attach a choir roster of Adult and Junior Choir Members, their Name, Address, City, State, Zip Code, Email, Voice Part (SATB), and Years of Service to the Music Ministry

Mail this form and a check payable to:
SFGOCM Stewardship
Anthony Giallourakis, Vice-President
1545 Pleasant Grove Drive
Dunedin, FL 34698

Questions
Email: agllrks@gmail.com
Phone: 727-424-8974

For SFGOCM Use Only

Amt. Rec'd: _____

Date Rec'd: _____

Check #: _____