



BCMEA Membership Enrollment Form

Name: _____

Home Address: _____

City, State, Zip: _____

Home Telephone: _____ **Cell :** _____

Email: _____

School District: _____

School Name: _____

School Address: _____

City, State, Zip: _____

School Telephone: _____

Do you have a key person / music chair for your district? Yes ____ No ____

Key Person Name: _____

Key Person Email: _____

Key Person Phone#: _____

Teaching Area: **General** **Chorus** **Band** **Orchestra**

Level(s) **Elementary** **Middle** **High** **Private**

Primary Instrument: _____

Secondary Instrument: _____

Adjudication Preference: _____

Please enclose a check for \$12 made payable to **BCMEA** and return to:
Derek Cressman, William Penn Middle School, 1524 Derbyshire Road, Yardley, PA
19067.