

DEMTA Membership Application

Name _____ Date _____

Address _____
Street City Zip Subdivision

Home Phone _____ Cell Phone _____

E-Mail _____ Date of Birth _____
Month Day

• **LESSONS**

What do you teach? ____ Piano ____ Voice ____ Instruments _____
____ Private lessons ____ Group Lessons ____ Computer Music Programs ____ Composition
____ Other _____

What levels do you teach? _____

Do you wish to get referrals for lessons? _____

Do you have any age, level, or time requirements? _____

• **EDUCATION**

Please list your education, degrees, certifications, etc. _____

• **EXPERIENCE**

How many years have you been teaching music? _____

Describe any performing you do: _____

Please list memberships in other professional organizations: _____

• **PHILOSOPHY**

What is your philosophy in teaching music? _____

• **SPECIALITY**

Is there anything particular or special in your teaching that you want to describe?

• **SERVICE**

Would you be willing to serve as an officer or committee chair for DEMTA? _____

Have you been a previous member of DEMTA? _____ When: _____

Please bring this completed application to the next DEMTA meeting or send it to:
Ann Riggs / 8728 E. Summit Road / Parker, CO 80138