

Choir Ministry

**Our Lady of Lourdes Church
Wellfleet Massachusetts
PO Box 1414
Wellfleet, MA 02667-1414**

Your Name: _____

Address: _____

_____ **Zip** _____

E-Mail Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

I Can/Cannot read music (please circle one)

I Do/Do not have previous choral experience (please circle one)

Thank you for your interest in our choir

Please give completed form to the organist or forward to above address