

Oregon Suzuki Association

Membership Form

First Name _____ Last Name _____ Title _____

Mailing Address _____

City _____ State _____ Zip Code _____

SAA Membership Number _____

List Full Address on Website? List only City & State on Website

Your website address (if you want it listed) _____

Phone # _____ Alternate Phone # _____

Email Address (please write clearly) _____

Please add my phone # to website Please add my email to the website

Please add me to the Facebook Group

Instruments Taught: Please Circle all that apply

Cello Flute Guitar Harp Organ Piano

Recorder Viola Violin Early Childhood

Languages Spoken in addition to English _____

Membership Fee \$26 Make Checks Payable to Oregon Suzuki Association

Membership entitles teachers to be listed on the OSA website and provides teachers access to our monthly discussion groups & quarterly teacher meet ups. You will be the first to hear about upcoming events & be a part of a collaborate group of teachers working to promote the Suzuki Method in our community. Thank you for joining the OSA!

**Please mail this form & your check to Oregon Suzuki Association % Celeste Okano
14255 SW Wilson Dr., Beaverton, OR 97008**

Questions? Contact Christine at GoodnerViolin@gmail.com