 Farmer’s and Crafts Market of Las Cruces, Inc.

Musician Membership Application

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| Name:  | Date:  |
| Business Name:  | Phone: ( ) |
| E-Mail Address: | Date of Birth (If Under 18):  |
| Mailing Address (**include city, state, zip**):  |
| Physical Address (**include city, state, zip**): **No PO Boxes**  |
| Are you a resident of Dona Ana County?  |
| Type of Physical Residence Documentation(*please describe if you check “other”):***No PO Box Addresses** **driver’s license** **utility bill** **rental lease agreement**  **other** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Group Permit?  |
| Names of other members:  |
| Parents Name (If under 18): | Phone Number:  |
| Emergency Contact: | Phone Number:  |

**What instruments will you be playing?**

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| Will you be using amplification?  |
| Required to report BTIN? |