



MEMPHIS SLIM COLLABORATORY

MEMBERSHIP APPLICATION

Name: _____ Phone: _____

Phone: _____ Email: _____

Address: _____ City: _____

Zip: _____ Twitter Handle (if applicable): @ _____

Do you work as...

- A freelance performer or service provider
- A member of a group or organization:

Band(s): _____

Company(ies): _____

Other Organization(s): _____

1. What are your music occupations and credits? (Please RANK any of the following occupations that apply to you – put the number “1” next to what you would like to be listed as your primary occupation, number “2” next to the occupation you would like listed as your secondary occupation, etc.)

Rank	Occupation	Credits (fill in)
	Musician <input type="checkbox"/> Vocalist <input type="checkbox"/> Rap Artist <input type="checkbox"/> Drummer/Percussionist <input type="checkbox"/> Bassist <input type="checkbox"/> Keyboards/Piano/Accordion <input type="checkbox"/> Brass <input type="checkbox"/> Woodwind <input type="checkbox"/> Harmonica <input type="checkbox"/> Strings <input type="checkbox"/> Guitar <input type="checkbox"/> DJ / Turntable Artist	
	Songwriter	
	Educator (music instrument or voice instruction)	
	Educator (music business or engineering/sound)	
	Choir Director / Band Directory	
	Conductor	
	Producer	
	Production Assistant	
	Technical Support Service (live show: sound, lights, pyro, etc)	
	Engineer (Studio)	
	Re-mixer	
	Booking Agent	
	Tour Manager	
	Manager / Artist Development	
	Publicist / Agent	
	Concert Promotion	
	Radio Announcer / Emcee / DJ	



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Rank	Occupation	Credits (fill in)
	Stage Manager	
	Stage Hand / "Roadie"	
	Lighting Technician	
	Merchandise Salesperson	
	Photographer / Videographer	
	Writer (publications / liner notes)	
	Website Developer	
	Graphic Design	
	Illustration Artist	
	Hair Stylist / Make-up Artist	
	Entertainment Lawyer	
	Equipment/Instrument Repair	
	Professional Support Services (Accountant / Tax Advisor)	
	Other (please specify)	

2. What genres of music do you write, perform, or produce? (check ALL that apply)

Check	Genre
<input type="checkbox"/>	Alternative
<input type="checkbox"/>	Blues
<input type="checkbox"/>	Bluegrass
<input type="checkbox"/>	Children's
<input type="checkbox"/>	Christian Contemporary
<input type="checkbox"/>	Classical
<input type="checkbox"/>	Comedy
<input type="checkbox"/>	Country
<input type="checkbox"/>	Dance
<input type="checkbox"/>	Film Scoring
<input type="checkbox"/>	Folk

Check	Genre
<input type="checkbox"/>	Gospel
<input type="checkbox"/>	Hard Rock
<input type="checkbox"/>	Hip Hop
<input type="checkbox"/>	Jazz
<input type="checkbox"/>	Jingle
<input type="checkbox"/>	Latin
<input type="checkbox"/>	Metal
<input type="checkbox"/>	Techno/Electronica
<input type="checkbox"/>	New Age
<input type="checkbox"/>	Opera
<input type="checkbox"/>	Polka

Check	Genre
<input type="checkbox"/>	Pop
<input type="checkbox"/>	Punk
<input type="checkbox"/>	Rap
<input type="checkbox"/>	Reggae
<input type="checkbox"/>	Rock
<input type="checkbox"/>	Spoken Word
<input type="checkbox"/>	World Music
<input type="checkbox"/>	Rhythm & Blues
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

3. How many years have you been working in music in Memphis? _____



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4. Which of the following do you have for yourself and/or your band, or artists(s) that you represent?
(Please check ALL that apply. If checked, please give the specific name or URL in the space provided.)

<input type="checkbox"/>	Website
<input type="checkbox"/>	Twitter
<input type="checkbox"/>	Facebook/Instagram
<input type="checkbox"/>	YouTube
<input type="checkbox"/>	Demo or other Completed Recording
<input type="checkbox"/>	Press Kit (paper)
<input type="checkbox"/>	Press Kit (electronic)
<input type="checkbox"/>	Manager

<input type="checkbox"/>	Booking Agent
<input type="checkbox"/>	Radio Publicist
<input type="checkbox"/>	General Publicist
<input type="checkbox"/>	Record Label
<input type="checkbox"/>	Physical Distributor
<input type="checkbox"/>	Digital Distributor
<input type="checkbox"/>	Lawyer
<input type="checkbox"/>	Accountant

5. How can we best help you right now?

<input type="checkbox"/>	Access to web-based educational resources: <u>if so</u> , what topics are you most interested in?
<input type="checkbox"/>	Access to computers and audio/video/graphics software: <u>if so</u> , what do you need to use the computers to do?
<input type="checkbox"/>	Help getting more performance bookings
<input type="checkbox"/>	Help with CD distribution
<input type="checkbox"/>	Help with on-line distribution
<input type="checkbox"/>	Help with audio or video recording
<input type="checkbox"/>	Help with publishing
<input type="checkbox"/>	Support for business planning and start-up
<input type="checkbox"/>	Access to capital
<input type="checkbox"/>	Other:

Signed by: _____ Date: _____

Admin Use Only:

Received by: _____ Date: _____

Membership Type: _____ Fee Amount: _____ Amount Paid: _____

Method of Payment: Cash Check Charge