**Text

Description automatically generated with low confidenceJAMAICA FEDERATION OF MUSICIANS AND AFFILIATES UNION**

PRESERVING JAMAICA’S LIVE ENTERTAINMNENT

AFFIX

PHOTO

HERE

SUITE #1

2 TRAFALGAR ROAD

KINGSTON 5

[WWW.JFMAU.COM](http://WWW.JFMAU.COM)

jfmaunion@gmail.com

**MEMBERSHIP APPLICATION FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **I (Mr., Mrs., Ms.)** | | | | | |
| **of** | | | | | |
| **HEREBY APPLY FOR ENROLLMENT AS:**  **⬜ FULL MEMBER ⬜ TEMPORARY MEMBER ⬜ AFFILIATED MEMBER / GROUP** | | | | | |
| **NATIONALITY :** | | | | | **DATE OF BIRTH** (DD/MM/YYYY) **:** |
| **STAGE NAME :** | | | **BUSINESS ADDRESS:** | | |
| **OCCUPATION:** | | | **TEL #:** | | |
| **CURRENT MANAGER / BOOKING AGENT/ TALENT :** | | | | | |
| **PRIMARY & OTHER INSTRUMENTS :** | | | | | |
| **ARE YOU A MEMBER OF ANY COLLECTION AGENCIES (BMI, ASCAP etc.) ? ⬜ YES ⬜ NO** | | | | | |
| **IF YES, PLEASE LIST THEM & YOUR MEMBERSHIP #:** | | **NAME: MEMBERSHIP #** | | | |
| **NAME: MEMBERSHIP #** | | | |
| **NAME: MEMBERSHIP #** | | | |
| **EMAIL ADDRESS:** | | | | **WEBSITE** | |
| **SPONSORED BY:** | **AND** | | | | |
| **APPLICANT SIGNATURE:** | | | | | **DATE:** |
| **REFERENCES (PERSONAL AND PROFESSIONAL): Please list two references** | | | | | |
| **NAME:** | | | | | **NAME:** |
| **ADDRESS:** | | | | | **ADDRESS:** |
| **TEL #:** | | | | | **TEL #:** |

**WHAT AREA OF WORK DO YOU THINK YOUR SKILLS WOULD BEST SUPPORT?**

|  |  |  |  |
| --- | --- | --- | --- |
| Membership and Outreach |  | Fundraising |  |
| Finance |  | Special Projects |  |
| Public Relations and Communications |  | Professional Development |  |

**PLEASE ANSWER THE FOLLOWING QUESTIONS AS BEST AS POSSIBLE**

|  |  |  |
| --- | --- | --- |
| **General** | ***Yes*** | ***No*** |
| I have read, understand and support the Objectives of the JFMAU |  |  |
| Have you read the Constitution of the JFMAU? |  |  |
| The Union develops and executes many projects, will you participate in these? |  |  |
| Will you have or make the time to do JFMAU work? |  |  |
| I promise to pay DUES to the JFMAU in accordance with its Constitution |  |  |
| You will be required to attend at least 60% of regular meetings. Are you able to? |  |  |
| You will be required to participate in General Meetings. Are you able to? |  |  |
| How long have you been involved in the Entertainment Industry? |  | |

|  |  |
| --- | --- |
| **MEMBERSHIP COMMITTEE’S USE** | **BOARD OF DIRECTORS USE** |
| Recommended by Committee [Y] [N] | Accepted by the Board of Directors [Y] [N] |
| Chairman’s Signature: | President Date: |
| Date: | Secretary Date: |

**MEMBERSHIP NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE ALSO ATTACH OR SUBMIT THE FOLLOWING:**

1. TWO (2) PASSPORT SIZED PHOTOS
2. COPY OF A GOVERNMENT ISSUED ID ( DRIVER’S LICENSE OR PASSPORT BIO PAGE)
3. AN ENTERTAINMENT PROFILE/BIO OF YOURSELF