



Membership Form

Association of Improvising Musicians Toronto [AIMToronto]

Date: _____

i. Contact

Name:

Email address:

Snail mail address:

Phone number:

Website:

ii. Musicianship Information

a. Instrument(s) played:

b. Are you a composer? _____

c. Please provide a short bio:

iii. Involvement

a. Do you wish to participate as a performer in an Interface Series? _____

If yes, in what capacity?

Improviser in an ad hoc group / Performer of composed music

b. Do you wish to participate as a volunteer, in the Interface Series? _____

c. Do you have a performance series or another outlet that you wish to be associated with AIMToronto? _____

If yes, please describe it:

iv. How did you hear about AIMToronto?

v. Please describe your outlook on and your approach to improvised music

vi. Can AIMToronto publish your description? _____