



Send to: USPA Membership  
7840 Arbor Park Dr.  
Parma, OH 44134  
Email: kak5568@att.net  
Call or Text: 216-215-7919

## MEMBERSHIP APPLICATION

New Member  Renewal  (Please check appropriate box)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Please mail a membership card  No membership card needed  (Select preference)

***Please answer questions below ONLY if you are a band leader,  
band member, or IJ/DJ***

Name of Band \_\_\_\_\_

Name of Bandleader? \_\_\_\_\_

Are you a vocalist? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you a IJ/DJ? YES \_\_\_\_\_ NO \_\_\_\_\_ Radio Station \_\_\_\_\_

Broadcast Days/Time \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

I hereby submit my application for membership in the UNITED STATES POLKA ASSOCIATION and agree to do all in my power to further the growth of this organization and the Polka Industry. I will be governed by the U.S.P.A. Constitution and By-Laws at all times. Membership dues are payable at the rate of \$10.00 per year. All member dues expire June 1st each year. Make all checks and money orders payable to the United States Polka Association. Mail to the Membership Chairperson.

Signed \_\_\_\_\_ Date \_\_\_\_\_