

## **Application Form for Tri-M® Student Membership**

## Return this completed form by November 1st to Mr. Calvo in Room A151

Name	Grade _	Email		
Address printout)		_ Overall G.P.A _	(please atta	ch Aeries
Member of: (Check all boxe	s that apply.)			
☐ Wind Ensemble	□ Orchestra	□ Cho	orus □ Ha	ndbells
☐ Steel Drums	□ Guitar □	Other	(please s	specify)
I understand that the minim	um national criteria fo	r Tri-M candidate	consideration include	:
school year (with the 2. Must be a member of 3. A 3.75 GPA or better 4. Continued character cooperation.  I agree to maintain these and I understand that my (initial please)	of National Art Hond in music and a 3.0 G strength that includes e minimum national c	or Society (NAHS PA or better over demonstration of riteria, and any oth	) all service, leadership, a ner criteria this chapte	er determines
Are you considering teaching	g music as a career?	□ Yes	□ No	
I understand my acceptance <b>School</b> is subject to returnir chosen above. Signature of Applicant				
Signature of Parent				





(retain for chapter records)

