

MASSACHUSETTS ACCORDION ASSOCIATION

Dues check one:

Individual .....( ) \$45 Due Sept. 1 each year

Family..... ( ) \$55

Member Name \_\_\_\_\_

Member Address \_\_\_\_\_

\_\_\_\_\_

Contact Infomation (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

Member Email: \_\_\_\_\_

.....  
Please send this statement with payment to:

Massachusetts Accordion Association  
c/o Carmen D'Angelo,  
11 Gigante Drive,  
Stoneham, MA 02180