



MEMBERSHIP FORM

Suzuki Music Association of Indonesia (SMAI)
Head Office: Jl. Kemang Raya 18C Jakarta Selatan 12730
Telephone: 021- 719-6219 Fax: 021- 718- 2343
Email: suzuki.indonesia@gmail.com www.suzuki-indonesia.org

NAME OF MEMBER _____

Instrument being Studied/ Taught with the Suzuki Method _____

Date of Registration Fee Payment/ Transfer _____

Cell Phone _____

Email Address _____

Mailing Address _____

MEMBERSHIP:

_____ **Individual Rp. 350,000**

Any student/ individual shall be eligible for Individual membership if enrolled for tuition with a teacher member or shows interest in furthering the purposes and objectives of SMAI.

_____ **Family Rp. 500,000**

A family shall be eligible for Family Membership when at least one child is enrolled for tuition with a teacher member.

_____ **Teachers Rp. 350,000**

SMAI Teacher members are those who are pursuing to be accredited as a Suzuki Teacher and have the appropriate qualifications and background.

Donation of _____ (tax deductible)

TOTAL PAYMENT: _____

By transfer only to:

Suzuki Music Association of Indonesia (SMAI)

CIMB Niaga Tangerang 363 01 000 37 00 2 or

BCA Kemang 1 Account 286- 3017564

Notice: Payment of membership fees (name of member)

This membership is valid for one year from the payment date.

Fax or scan/ email or mail this application with a copy of the transfer slip to the contact information above.

Name and Signature: _____ Date: _____