



SOPHIA APPLICATION FORM

Contact Information:

Name: _____

Address: _____

Phone: _____

eMail: _____

Preferred contact method: Phone / eMail / Both

Age (if applicant under 18): _____

Years of harp study: _____

Name(s) of harp instructors: _____

Can you read music? Yes / No

If self-taught, describe your ability to play the instrument:

What types of harps do you own? (pedal, lever, lap, etc.)

What activities are you interested in?

Circles

Social events

Attending harp concerts

Workshops

Student/adult harp recitals

Fund raising

Formal ensemble performance

Informal public performances

Other: _____

How did you hear about SOPHIA? _____

Please check the box below to indicate that you have read the pdf file "[SOPHIA Membership Guidelines](#)" that is located on our website.

Applicant

Parent (if applicant under 18)

Please send this form to:

SOPHIA

PO Box 30402

Tucson, AZ 85751

** Upon approval of this application, a dues form will be sent to your address.