

**APPLICATION FOR AFFILIATION AS A RECORDER ORCHESTRA**

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| --- | --- |
| Date: |  |
|  |  |
| Name of group: |  |
|  |  |
| Name of Representative: |  |
| (Recorder Orchestras must select one member to serve as a representative to the ARS. The representative must be an ARS member and need not be a presiding officer, conductor, or music director of the Recorder Orchestra) |
|  |  |
| Representative’s email: |  |
| (Required, your application will not be processed without an email address) |
|  |
| Representative’s Address: |  |
| City, state, zip code: |  |
| Phone: |  |
| Group’s website address: |  |
| Group’s business address:  |  |
| City, state, zip code: |  |

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**To qualify as a recorder orchestra, your group must satisfy all of the following five criteria:**

1. The group must have at least 10 permanent recorder positions; that, is at least ten persons or “seats” assigned to playing recorder on a permanent basis. Recorder orchestras may include other instruments or singers, either on a permanent or temporary basis.
2. Groups with 10 to 15 total members must have at least 3 ARS members. For groups with 16 members or more, at least 20 percent must be ARS members. The 20 percent figure is rounded upward or downward to the nearest whole number. All members of the group, not just recorder players, are counted toward this requirement. In other words, if your group has 15 recorder players and 12 members who play other instruments, your group must have 5 ARS members to satisfy this criterion (27 x 20 percent = 5.4, rounded down to 5).
3. The group must have at least five recorder voices (any five out of Sopranino, Soprano, Alto, Tenor, Bass, Great Bass, Contrabass, Sub-Great Bass, Sub-Contrabass) playing on a regular basis. For example, if your group has one sopranino, two sopranos, three altos, four tenors, and two basses, you meet this criterion. If your group has three each of soprano, alto, tenor, bass, your group does not satisfy this criterion. It is not required that members of your group be assigned a particular voice on a permanent basis; that, is, you do not have to have permanent positions like a symphony orchestra, so long as on a regular basis, your group uses at least five voices.
4. The group must rehearse on a regular basis. Any frequency of rehearsals (once a week, once a month, once every two months) is acceptable so long as your group adheres to a regular schedule.
5. The group must refer to itself as a recorder orchestra, and not as some other kind of ensemble. For example, “Metropolitan Recorder Orchestra” is acceptable; “Metropolitan Consort” or “Metropolitan Ensemble” is not.

To help us determine whether you satisfy these criteria, please answer the following questions and provide the requested information:

1. How many members does your group have? (include recorder players and non-recorder players) \_\_\_\_\_

2. How many regular recorder players or recorder playing positions does your group have? \_\_\_\_

3. Please circle the recorder voices played regularly in your group:

Sopranino

Soprano

Alto

Tenor

Bass

Great Bass

Contrabass

Sub-Great Bass

Sub-Contrabass

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. How often does your group rehearse? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. How many members of your group are members of ARS? \_\_\_\_

Please provide the names of your group’s ARS Members in an attachment.

Please enclose any dues for new ARS members.

1. If your group has a website, please print and attach the homepage.

If your group has a flyer, informational brochure, or concert program, please include a copy.

**Please provide the following information to help us learn more about your group. This information is not necessary to process your application.**

Who is your musical director/conductor? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who are your group officers?

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What, if any, are your plans for public performances? If you have given public performances, please describe them or attach programs.

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What are your plans, if any, for workshops and other social or public activities:

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With which ARS chapters or consorts, if any, is your group associated or affiliated?:

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Other information or comments:

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Signed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have any questions about this application or the criteria for Recorder Orchestra affiliation, please contact Nancy Gorbman (ngorbmanars@gmail.com).

Email completed application to: director@americanrecorder.org, or mail to: American Recorder Society, PO Box 480054, Charlotte NC 28269-5300.