

Ohio String Teachers Association
I Volunteer to Connect
January 2011

Name: _____ Instrument: _____

Address: _____

Phone: Home: _____ Cell: _____

e-mail: _____

What ways would you like to contribute to OSTA:

- | | |
|---|--|
| <input type="checkbox"/> Run for Office | <input type="checkbox"/> Serve on the Board |
| <input type="checkbox"/> Serve on a committee | <input type="checkbox"/> Help with an event in my area |
| <input type="checkbox"/> Help with the Newsletter | <input type="checkbox"/> Help with the web-site |
| <input type="checkbox"/> _____
(other, please explain) | |

Please return this form to:

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Cleveland, OH 44121
kah24@case.edu