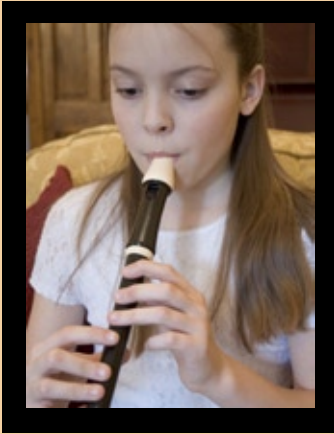




# Friends of Music Therapy

**Friends can make a difference** Become a Friend of Music Therapy by donating \$25 or more and you or someone you designate will be listed as a Friend of Music Therapy for one year. You or your friend will also receive a Friends of Music Therapy Certificate. In addition, each friend will receive either a 1 year subscription to The American Music Therapy Association's newsletter, *Music Therapy Matters*, or a gift from AMTA. Your support as a Friend of Music Therapy helps AMTA increase public awareness for Music Therapy.



## Your Information

First name \_\_\_\_\_

Last name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

- This membership is for me       This membership is a gift



## Gift Recipient Information

First name \_\_\_\_\_

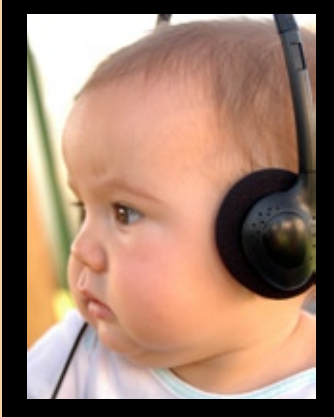
Last name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Please indicate your choice of:  1 year subscription to *Music Therapy Matters* or  AMTA gift.  
(For additional gift recipients, please use the reverse side of this form.)



## Payment Information

- MasterCard       VISA       check or money order (payable to AMTA in US dollars)

Total amount: (\$25 per person or \$100 for 5 people) \$ \_\_\_\_\_

Card number \_\_\_\_\_ Exp. date: \_\_\_\_\_

Name as printed on card \_\_\_\_\_

Signature \_\_\_\_\_

Complete this form and mail to Friends of Music Therapy, 8455 Colesville Road, Suite 1000, Silver Spring, Maryland, 20910 or fax to (301) 589 5175. For more information, see [www.musictherapy.org](http://www.musictherapy.org) or call (301) 589 3300.