



The DC Hi-Fi Group Membership Application

Name _____

Address _____ **City** _____ **State/Zip** _____

Email _____

Phone Number _____

Individual Membership Dues: (Check One) Annual \$80 _____ Bi-Annual \$140 _____

Manufacturer/Dealer Membership Dues: Annual \$250 _____

Make check payable to:

**The DC Hi-Fi Group
P.O. Box 266
Kensington, MD 20895-0266**

Audio Backgrounder (To be considered for DC Hi-Fi Group System-Of-The-Month)

What brand of components are in your current audio system? (amp, preamp, speakers, DAC, player,etc.)

Volunteer Permission

Would you be willing to volunteer for The DC Hi-Fi Group during meetings and special events?

Yes _____ **No** _____

Signature _____

By signing this membership form, I agree to abide by all rules, bylaws and procedures of the DC Hi-Fi Group. a non-profit membership association.

For additional information, email John Gatski at dchifigroup@verizon.net; or call 301-946-5130. Our Facebook page URL is: <https://www.facebook.com/dchifigroup/>

Additional forms can be obtained from the Facebook Page.