

Chamber Music Workshop Registration Form

Student's Name:

Parent/Guardian Name:

Address:

Telephone numbers (include cell):

Email: _____

Student's Age (as of July 7): _____ Grade Just Completed: _____

School Attended Last Year: _____

Music Teacher's Name: _____

Years of Study: _____

Recent repertoire studied:

I certify that the above information is correct, and I agree to allow my child to participate in the festival's program and activities.

Parent's or Guardian's Name:

I promise to obey the rules of the workshop and the university, to participate in the workshop's activities, and to try to profit by the instruction.

Student's Name:

Please include your payment of \$170 with this application form and medical release form. The application deadline is June 15.
(\$20 late fee will apply to all registrations postmarked after June 15)