



## REGISTRATION FORM

Please bring completed form to the first rehearsal along with a check for \$175. \$350 full year made out to:  
SINFONIA GULF COAST

SINFONIETTA STRINGS (*beginner to intermediate*)

YOUTH ORCHESTRA (*advanced intermediate to advanced*)

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_

INSTRUMENT \_\_\_\_\_ YEARS STUDIED \_\_\_\_\_ SECONDARY INSTRUMENT \_\_\_\_\_

TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

### PARENT/GUARDIAN

MOTHER'S NAME \_\_\_\_\_ DAY PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ DAY PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

SCHOOL \_\_\_\_\_ COUNTY \_\_\_\_\_

\*PRIVATE TEACHER \_\_\_\_\_ TIME STUDIED WITH THIS TEACHER \_\_\_\_\_

What orchestras or ensembles do you currently play in? \_\_\_\_\_

What solo pieces, if any, have you performed in public? \_\_\_\_\_

List any (music) prizes or awards you have won \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

payment received  check #: \_\_\_\_\_ Audience view  spreadsheet  waiver  policies