

Registration Form

Part 3: Fees

A non-refundable \$25 application fee is due with registration. If participant is enrolled in one or more programs, or multiple family members are enrolled in a given year, only one registration fee is required per family per year. Please contact the office to verify discount eligibility.

Applications will not be considered complete unless all questions are answered below.

Private Instruction Tuition

Instrument 1: _____ Instrument 2: _____

Preferred days/times (please indicate several options) Hours available are 9:00 a.m. – 7:30 p.m.

Monday Tuesday Wednesday Thursday Friday

Tuition

| | | |
|-------------------|---|---|
| Weekly | 16 weeks | 32 weeks |
| 30 minutes : \$43 | <input type="checkbox"/> 30 minutes: \$688 | <input type="checkbox"/> 30 mins: \$1376 |
| 45 minutes: \$51 | <input type="checkbox"/> 45 minutes : \$816 | <input type="checkbox"/> 45 mins: \$1632 |
| 60 minutes: \$60 | <input type="checkbox"/> 60 minutes: \$960 | <input type="checkbox"/> 60 min: \$1920 |
| 90 minutes: \$90 | <input type="checkbox"/> 90 minutes: \$1440 | <input type="checkbox"/> 90 minutes: \$2880 |

INSTRUCTION TOTAL \$ _____

Odeon enrollment

Full year – two, sixteen weeks semesters

- Junior ensemble: \$250
- Youth ensemble: \$450
- Chamber orchestra: \$450
- Adult orchestra: \$450

ODEON TOTAL \$ _____

Chamber Music Coaching- pre-formed ensembles or individuals

\$20 per person/per coaching x _____ no. weeks **COACHING TOTAL** \$ _____

(each ensemble member pays separately. Contact Bay Chamber office regarding coaching length)

Pre-formed ensemble _____ Individual applicant _____

Class registration

First Class Name: _____ 2nd Class: _____

Tuition: _____

CLASS TOTAL \$ _____

Total programs from above \$ _____

If scholarship applicant, 10 % deposit of total from line A is due now \$ _____

If registering for multiple programs or multiple family members, deduct 10% \$ _____

Application fee (\$25 per family/ per YEAR) \$ 25 Y N

Total enclosed with this application **GRAND TOTAL** \$ _____

A \$10 late charge will be applied to payments past due 15 days.

Payment is due before the first class session.

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Part 4: Scholarship

Bay Chamber provides scholarship in case of financial need, so that all eligible students may participate, regardless of ability to pay.

Scholarships are based on proven financial need, household income, family size, financial obligations, and are limited by the availability of CMS resources. Tuition assistance will not exceed 75% of tuition. **Please attach a copy of your most recent Federal Income Tax form (1040) with this application. Your request for scholarship will not be considered without a copy of this form.**

- 1. Total annual income of household from all sources (include salaries, wages, alimony, child support, social security, disability, public assistance, etc...) \$ _____
- 2. Number of people supported by this income _____
- 3. Number of dependent children in family _____
- 4. Does your child receive reduced or free lunch Yes _____ No _____
- 5. The financial aid committee will also take into consideration any special circumstances regarding your current family or financial situation. Please add any comments below that you feel would be important for the financial aid committee to consider when reviewing your application. If you need more room, feel free to include a separate letter with your application.

Part 5: Policies and Procedure and Photo release

By signing this form I (we) agree to abide by the Bay Chamber Community Music School Policies and Procedures as presented to me upon registration and included here. My signature below indicates the information above is complete and accurate.

PHOTO RELEASE: I give Bay Chamber permission to publish in print, electronic, or video format the likeness or image of myself/my child. I release all claims against Bay Chamber with respect to copyright ownership and publication including any claim for compensation related to use of the materials. I understand cautionary steps will be taken to provide minimum identifying information and no specific mailing address or phone number will be used.

Participant's signature
(Parent's signature is required if participant is under 18 years of age)

Printed name

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Part 6: Volunteering

Would you or your child be willing to volunteer your time at Bay Chamber events and/or for occasional administrative support? *(Your answer here will not affect the financial aid decision.)*

Yes _____ No _____

Part 7: Payment

Payment Options: (check one)

- Full Payment **100%** due with this application
- Multi-payment plan Four payments charged automatically to credit card in fall or spring. Two payments in summer. **Must submit a valid Visa or MasterCard debit or credit card.** First payment due before first class.
- Scholarship applicant **10%** due with this application; remainder due in 4 installments upon notice of scholarship awarded (see below for scholarship information) Must include scholarship application and copy of form 1040. **Must submit a valid Visa or MasterCard debit or credit card, which will automatically be charged.**

Enclosed is check number: _____

Please make check(s) payable to Bay Chamber Concerts. Only for Full Payment or Deposit

Please charge \$_____ to my credit card: Visa MasterCard

I authorize Bay Chamber to automatically charge my account when tuition is due:

____ Full payment (100% now)

____ Multi-payment (4 payments per semester). Charged September 6, October 6, November 6, December 6 and January 6, February 6, March 6, April 6. Late registration will be pro-rated.

Card number: _____ Expiration Date: _____ CVV# _____
(On reverse of card)

Cardholder Name: (please print) _____

Signature: _____ Date: _____

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Office Only

Instrument(s): _____ Instructor: _____

Lesson Day _____ Lesson Time: _____ No. weeks _____ 30 min 45 min 60 min

Fee paid: Y____N_____ Date Paid _____ Deposit: \$ _____ Amount Due \$ _____

Scholarship: Y N Amount \$ _____ % _____

Vivaldi Project _____ \$50 deposit paid _____ Instrument loaned _____ Log # _____