

Registration Form (Effective 10/25/11)

Part 1: Participant Information - PLEASE PRINT. *Please submit completed form with payment and scholarship request, if applicable. Schedules, tuition and policy information can be found in our catalogue or online at www.baychamberconcerts.org. Please discuss faculty and availability with registrar before submitting.*

Check all that apply: New Student Returning Student Adult student

Student Name: _____ **Nickname:** _____

First Last

Mailing address: _____

Street

City

State

Zip

Home Phone: _____ **Cell Phone:** _____

Email: _____ **Gender:** Male Female **DOB:** _____

Instrument: _____ **Length of time played?** _____

Current music teacher: _____

Name

Phone

Email

School: _____ **Grade:** _____

(Additional students in family, or additional instrument/class for Student 1)

Student # 2 Name: _____ **Nickname:** _____

First Last

Email: _____ **Gender:** Male Female **DOB:** _____

Instrument: _____ **Length of time played?** _____

Current music teacher: _____

Name

Phone

Email

School: _____ **Grade:** _____

Student # 3 Name: _____ **Nickname:** _____

First Last

Email: _____ **Gender:** Male Female **DOB:** _____

Instrument: _____ **Length of time played?** _____

Current music teacher: _____

Name

Phone

Email

School: _____ **Grade:** _____

concerts & community music school

Part 2: Parent/Guardian Information (If participant is 18 years or younger)

Bill to Parent 1/Guardian 1

Bill to Parent 2 /Guardian 2

Name: _____

Name: _____

Mailing Address: _____
(If different from above)

Mailing Address: _____
(If different from above)

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

Emergency Contact: _____
Name Phone

Part 3: Fees

A non-refundable \$25 registration fee is due this application. 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. All discounts will be applied by Bay Chamber. *Applications will not be considered complete unless all questions are answered below.*

Private Instruction Tuition

Instrument 1: _____ Instrument 2: _____

Tuition

| Lesson Fees | 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 semesters

- Beginning String Ensemble \$180 (8 weeks each)
- Junior Ensemble: \$300
- Symphony Orchestra: \$500
- Chamber Orchestra: \$500 – strings
- Adult Orchestra: \$500

One Semester

- Beginning String Ensemble \$90 (8 weeks)
- Junior Ensemble: \$150
- Symphony Ensemble: \$250
- Chamber Orchestra: \$250 – strings
- Adult Orchestra: \$250

ODEON TOTAL \$ _____

Chamber Music or Jazz Ensemble Coaching (16 week enrollment required)

- Duo coaching/ per person/ per hour coaching session \$30
- Ensemble (3 or more)/ per person/ per hour coaching session \$20

COACHING TOTAL \$ _____

Single Lessons (Individual and/or Group)

\$75 per hour
(one hour minimum) \$ _____

Class registration: please refer to catalogue for class information

First Class Name: _____

Tuition: \$ _____

Second Class Name: _____

Tuition: \$ _____

If interested in registering for Music Together, please contact the office.

TOTAL from above: (Private Instruction, Odeon, coaching, classes) \$ _____

Choose one of the following Deposit Amounts (if paying in Full no deposit required)

- Scholarship applicant 10 % deposit of TOTAL
- Register for FULL YEAR of Private Instruction and/or Odeon, 10% deposit of TOTAL
- Registration for one semester or individual classes, 20% deposit of TOTAL

Deposit Amount (Deposits will be applied to total tuition) \$ _____

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

Amount enclosed (deposit + registration fee) \$ _____

Balance Due (Total less Amount enclosed) OR (Full Payment plus registration) \$ _____

Part 4: Payment - Payment is due before the first class session.

Payment Options: (check one)

- Full Payment 100% due with this application (deposit not required if paid in full)
- 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 Four payments charged automatically to credit card in fall or spring based on scholarship award. Must include scholarship application and copy of form 1040. **Must submit a valid Visa or MasterCard debit or credit card.** First payment due before first class

Enclosed is check number: _____ Full payment or Deposit

Please make check(s) payable to Bay Chamber Concerts.

OR

I authorize Bay Chamber to charge my account now:

- Payment in Full to my credit card: Visa MasterCard
- Please charge \$ _____ Deposit to my credit card: Visa MasterCard

I authorize Bay Chamber to automatically charge my account when tuition is due in Fall and Spring:

- Please charge \$ _____ Balance Due in full to my credit card
- 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: _____ Exp Date: _____ CVV# _____

(on reverse of card)

Cardholder name (please print) _____

Signature _____ Date _____

Part 5: Volunteering

Would you or your child be willing to volunteer your time at Bay Chamber events and/or for occasional administrative support? Yes No

Part 6: Policies and Procedures, Photo Release and Communication Verification

- I would like to be listed in the **school directory** which is shared with students and faculty.
- 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** **I do NOT 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

