

Vivace! Choral Program

2009-2010 Registration Form

For Director Use Only:

- Cathedrals
- Mixed
- Kids
- V! Kids Mentor

Chorister's Information

Last Name _____ First Name _____
 Address _____ City _____, WA Zip 98 _____
 Phone (____) _____ Age _____ Grade _____ Birthdate (MM/DD/YYYY) _____
 School _____ District _____ School Music Teacher _____
 Chorister's E-mail Address _____

Parent/Guardian's Information

Last Name 1 _____ First Name 1 _____
 Last Name 2 _____ First Name 2 _____
 Address _____ City _____, WA Zip 98 _____
If different from chorister's address.
 Cell/Work phone 1 (____) _____ Alternate phone 1 (____) _____
 Cell/Work phone 2 (____) _____ Alternate phone 2 (____) _____
 Parent's E-mail Address(es) 1. _____ 2. _____

This email will be used to send out rehearsal changes, choir updates, and monthly statements. Please use an email that is checked frequently.

Special guardian instructions relevant to the choir (i.e. health concerns); please check the box and list instructions on the back of the registration form. To opt-out of monthly electronic statements

Who has permission to transport your chorister to and from regular rehearsals, besides Parents/Guardians?

Name _____ Relationship _____ Phone (____) _____
 Name _____ Relationship _____ Phone (____) _____

Emergency Contact Name _____ Relationship _____ Phone (____) _____
Please provide an emergency contact when parents/guardians cannot be reached.

I consent to the use of my child's name, photographs and quotations in Vivace! Choral Program brochures, advertisements, and other related publications. I am the parent or the legally authorized guardian of the child. This form is signed and delivered voluntarily and will remain in effect until the child no longer participates in Vivace! Choral Program or written notification stating withdrawal of permission and release is received by the Vivace! Choral Program staff.

NOTE: In case of non-payment, or payments not received on time, the chorister may be excluded from a concert performance and/or dropped from the choir.

By signing below, I agree to the tuition payment schedule and statements listed.

Signature of adult chorister OR parent/guardian of a minor (18 and younger) _____
Date

For Office Use Only:

2009-2010 Tuition Payment Options and Fees

Tuition

- Lump sum for full year
- Monthly Payments (9),
Sept through May.

Fees

- \$40 non-refundable registration fee

Uniform

- Uniform \$ _____ Size: _____
- Received Need to Order

Discounts

- Full Payment Discount (-\$30)
- Family Discount (-\$ _____)