



PERFORMING ARTS ENSEMBLES REGISTRATION FORM 2018

Family Name: _____ Student's Given Name _____

Male / Female (please circle)

Instrument: _____ Level: _____ Hire required

Primary School: _____

Parent / Caregiver Name 1: _____ Mobile/Work/Home: _____

Parent / Caregiver Name 2: _____ Mobile/Work/Home: _____

Ensemble Preference: Please tick

- Concert Band String Ensemble Percussion Ensemble Guitar Ensemble
 Vocal Ensemble Dance Groups Wind Ensemble
 Scholarship – for students interested in learning the targeted instrument bassoon or double bass.

Previous Band / Vocal Experience _____

Parental Support: I would like to become involved in the following capacity:

- I am happy to offer occasional assistance at events and performances.

I understand that by registering, I have committed to paying the Ensemble fees. I also understand that my child has committed to ongoing practice, rehearsals and performances for 2018.

Student's name

Signature of Student

Date

Parent / Caregiver's Name

Signature of Parent / Caregiver

Date