AUBURN YOUTH SYMPHONY APPLICATION 2007-2008 SEASON

	For Treasurer's Use						
Tuition for Fall semester=\$200.00 due September	Amt. Paid	date ca	sh check#				
Tuition for Spring semester=\$200.00 due January	Amt. Paid	date ca	sh check#				
An annual, refundable, music deposit of \$10 is als	o required						
M · · · · · · · · · · · · · · · · · · ·							
Musician's Full Name: Musician's Age Male Female Gra	ada Cabaa	1					
Musician's Age Male Female On	ade Schoo	1					
Parent/Guardian Name:							
Mailing Address:							
Mailing Address: Street or P.O. Box		City	Zip Code				
Telephone: Day:	elephone: Day: Evening:						
Dhone number to use in ease a rehearsel has to be	aanaallad:						
Phone number to use in case a rehearsal has to be	cancened.						
Primary Instrument:		Year	s of Study:				
Music Teacher:	Phone:		email:				
Other instruments you play:							
71	1						
Please list any ensembles in which you have playe	ed:						
N 1: 4 1 1 1							
Please list any major orchestral works you have							
performed:							
How did you have about the Auburn Vouth Cumpheny and why do you want to isin?							
How did you hear about the Auburn Youth Symphony and why do you want to join?							
The Auburn Youth Symphony often communic	ates information	on and undate	es to members via				
The Auburn Youth Symphony often communicates information and updates to members via email. Please list the email address to be used for such communication:							
Does the Auburn Youth Symphony have permission	on to publish yo	our student's n	ame in a directory to be				
shared only with other members? Yes No							
If Yes, please list the telephone number to be used	I in the directory	у.					
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Does the Auburn Youth Symphony have permission to use your student's picture in brochures, articles,							
and/or programs promoting the symphony? Yes _	NO						
Parent Signature:		Date:					