

# *Vivace!* Choral Program

## 2010-2011 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:**

**2010-2011 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 (-\$ \_\_\_\_\_)

**Parent Orientation Meeting**

- Meeting
- Phone