

LA JEUNESSE YOUTH ORCHESTRA

2022/23 Season Registration

Musician's Information:

Name: _____

Address with Postal Code: _____

Musician Email: _____ * Home Phone Number: _____

Date of Birth (mm/dd/yyyy): _____

School: _____ School Grade in Sept 2022: _____

Primary Instrument: _____ # Years Studied: _____

Current Music Grade Level: Suzuki Book _____ and/or RCM Grade _____ Year Completed _____

School Music Teacher(s) Name(s): _____

Phone#/email: _____

Private Music Teacher(s) Name(s): _____

Phone#/email: _____

Additional Instrument(s) and Grade Level: _____

Other Music Skills or Experience: _____

Parent/Guardian/Emergency Contact Information:

Primary Contact Name: _____ Relationship: _____

Primary Email: _____ * Phone # (Home): _____

Cell Phone#: _____

Work Email _____ Phone # (Work): _____

Secondary Contact Name: _____ Relationship: _____

Primary Email: _____ * Phone # (Home) _____

Cell Phone #: _____

Work Email: _____ Phone # (Work): _____

Does your child carry an Epipen? Yes ___ No ___ Reason for Epipen? _____

Please advise us of any other information (special needs/allergies/medical/other)

Parents will be asked to volunteer with various endeavors of the orchestra. Some endeavors require volunteers to undergo a Vulnerable Sector Check at your expense.

*Used for member email messages from LJYO Manager

FEES	STANDARD PAYMENT
Registration/Membership Fee	\$ 300
Music Deposit (refundable)	\$ 50
Fundraising Commitment (eligible for refund)	\$ 200
Ticket Sales Commitment	\$ 450
Less Family Discount (where applicable)	\$
Total	\$ 1,000

I hereby acknowledge that my personal information shall be kept confidential and used or released strictly as required for administrative purposes by the La Jeunesse Youth Orchestra Incorporated.

Parent/Guardian Name (Please Print) _____ Date:(mm/dd/yyyy) _____

Parent/Guardian Signature _____

Member Signature if over 18 years of age _____

Music For Life!