

VANCOUVER ISLAND SYMPHONY CHILDREN'S CHOIR REGISTRATION FORM - 2019-2020 SEASON



Name: _____
(Name that will appear in the Concert Programmes)

Keeping Music **LIVE!**

Please complete and return this form to our office.

- I have read this Registration Package and understand that my child is needed at ALL rehearsals and performances in September 2019 to January 2020 on Thursdays. The Choir Registration Fee for music instruction is: **\$100**. This also includes the choir t-shirt.

Expectations: Please read the following

- Members are required to get to the rehearsals on their own.
- If a member is ill and cannot attend a rehearsal – please call our office or email: office@vancouverislandsymphony.com
- Members are asked to show up on time. **Rehearsal begins at 5:00 pm and will finish at 6:00 pm. PARENTS PLEASE BE ON TIME FOR PICK-UP.** Please note there is a limited amount of rehearsal time to learn the music and members are expected to be present to learn the music. All music is memorized by the Choir.
- Parents are not able to sit in on rehearsals due to lack of space available.
- Performance UNIFORM:** Members will be required to wear black pants, skirts and black shoes (member to provide).
- T-Shirts will be provided as part of the membership fee to Choir Members.
- The Symphony will offer an early bird group ticket rate to families for the Symphony performances.

Symphonic Children's Choir Photographic Permission Form: 2019-20

I give my permission for my child _____ to be photographed, filmed and audio-recorded when representing the Vancouver Island Symphony Children's Choir. I understand that these materials will be used for promotional purposes this year and in the future including raising funds for the Education Program. In addition, I understand that if the news media photograph my child, their name will be given to the media, if requested.

By my signature herein, I agree to terms listed above:

Parent 1 Signature (required)	Parent 2 Signature (required)	Date
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****Both parents' signatures are required**

PARTICIPANT INFORMATION

Street Address	City	Postal Code
Participant D.O.B (dd/mm/yyyy)	School Grade as of Sept 2019	T-Shirt Size
Parent/Guardian 1 Name:	Parent/Guardian 2 Name:	
Parent 1 Phone:	Parent 2 Phone:	
Place of Employment:	Place of Employment:	
Primary Email address to use for Choir Communication:	Choir Member's School:	

Presented by:

