



DES MOINES SYMPHONY

ACADEMY

2017 SUMMER PROGRAMS REGISTRATION FORM

PROGRAM— INSTRUCTOR

TUITION

- | | |
|---|-------|
| <input type="checkbox"/> String Orchestra Camp – Meyer, Senger
Instrument: _____ | \$105 |
| <input type="checkbox"/> Intro to Flute Choir (Middle School) – Stein | \$95 |
| <input type="checkbox"/> Flute Choir Camp (High School) – Stein | \$135 |
| <input type="checkbox"/> Brass Ensemble Camp – Maday, Johnson | \$125 |

REGISTRATION INFORMATION

Student Name _____ Student Birth date ___/___/_____

Parent(s)/Guardian(s) : _____

Mailing address _____

City _____ State IA Zip _____

Phone: Primary _____ Secondary _____ Student Cell _____

Primary/Billing Email address _____

Secondary Email address(es) _____

School _____ Grade 2016-2017 _____

Parent/Guardian No. 1 Place of Employment _____ Work Phone _____

Parent/Guardian No. 2 Place of Employment _____ Work Phone _____

PARENT/GUARDIAN POLICIES ACKNOWLEDGEMENT

By initialing and signing below, I acknowledge and accept the following:

- I have received a copy of the Symphony Academy’s Summer Programs Tuition, Attendance and Student Safety Policy and understand my responsibilities and obligations regarding tuition, attendance and student safety. _____(initials)
- I grant permission for photos/video to be taken of my child for use in Symphony Academy promotional materials. _____(initials)

Parent/Guardian Signature

Date

PAYMENT INFORMATION

CHECK# _____ Please make checks payable to Des Moines Symphony Academy

CREDIT CARD (VISA, MASTERCARD, DISCOVER, AMERICAN EXPRESS)

Card #: _____ Exp. Date: _____ CVC: _____

Completed Registration Forms can be returned to **Joshua Barlage, Managing Director,**
Des Moines Symphony Academy, 1011 Locust Street, Suite 400, Des Moines, IA 50309
 or e-mailed to joshua@dmsymphony.org.