



DES MOINES SYMPHONY
ACADEMY
 2017 WINTER FLUTE CHOIR REGISTRATION FORM

WORKSHOP, CAMP/INSTRUCTOR

TUITION

WINTER FLUTE CHOIR/STEIN

\$95

STUDENT REGISTRATION INFORMATION

Student Name _____ Student Birth date ___/___/_____

I am a current Academy student and my contact information is already on record

Mailing address _____

City _____ State IA Zip _____

Primary/Billing Email address _____

Secondary Email address(es) _____

School _____ Grade 2017-2018 _____ Student Cell _____

Parent/Guardian _____ Primary Phone _____

Place of Employment _____ Work Phone _____

Parent/Guardian _____ Primary Phone _____

Place of Employment _____ Work Phone _____

PARENT/GUARDIAN POLICIES ACKNOWLEDGEMENT

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

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

 Parent/Guardian Signature

 Date

TUITION PAYMENT METHOD

Credit Card Type: Visa Master Card Discover American Express

Card Number No.: _____ Exp. Date: _____ Security Code: _____

Check No. _____ (checks should be made payable to Des Moines Symphony Academy)

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 academyregistrar@dmsymphony.org.