

FORM A: 2010 SUMMER SCHOOL FAMILY REGISTRATION

(Please print clearly. Please do not use staples.)

FAMILY NAME:	
FAMILY ID: (if known)	
FAMILY ADDRESS:	
POSTAL ADDRESS: (if different)	
EMAIL ADDRESS	

	Child 1	Child 2
CHILD'S FIRST NAME		
CHILD'S FAMILY NAME:		
DATE OF BIRTH		
AGE AT 1-1-2010 (Years)		
GENDER		
SCHOOL YEAR IN 2010		
PROGRAM ENROLLING FOR (circle one only)	Junior Senior Advanced	Junior Senior Advanced
Medical problems, allergies, current medication etc. (details)		
Known Behavioural Issues		

	Child 3	Child 4
CHILD'S FIRST NAME		
CHILD'S FAMILY NAME:		
DATE OF BIRTH		
AGE AT 1-1-2010 (Years)		
GENDER		
SCHOOL YEAR IN 2010		
PROGRAM ENROLLING FOR (circle one only)	Junior Senior Advanced	Junior Senior Advanced
Medical problems, allergies, current medication etc. (details)		
Known Behavioural Issues		

(Continued Overleaf)

PARENT CONTACT DETAILS First contact		PARENT CONTACT DETAILS Second or alternative contact	
NAME		NAME	
ADDRESS		ADDRESS	
PLACE OF EMPLOYMENT		PLACE OF EMPLOYMENT	
WORK NO.		WORK NO.	
HOME NO.		HOME NO.	
MOBILE NO.		MOBILE NO.	

ADDITIONAL EMERGENCY CONTACT details of 1 adult (friend or relative) who has their own transport **available during Summer School hours** in case of sickness.

NAME		WORK NO.	
ADDRESS		HOME NO.	
		MOBILE NO.	

CONTACT DETAILS FOR YOUR FAMILY DOCTOR			
NAME		PHONE NO.	
ADDRESS			

AUTHORITY: I give permission for.....

to attend the 2010 YMS Summer School and to participate in all activities of the Summer School.

I give permission for the YMS staff or YMS Committee to take any action considered necessary in case of an emergency including physical restraint if necessary. I undertake to pay any medical costs, including ambulance charges, which may be incurred. I give / do not give permission for my child to be given Panadol. (If you **do not** give permission for your child to be given Panadol and your child presents at the office with a headache etc, you will be called for permission before any medication is given.)

I understand that I will be contacted if my child behaves in an inappropriate manner and, if necessary, I will collect my child from Summer School.

I acknowledge that due to responsible child care precautions, any adult visiting Summer School must register at the YMS office before entering the Summer School premises, at all times and without exceptions.

I give / do not give permission for my child / children to be photographed for the purpose of publicity and / or promotions for the program.

If there is any limitation(s) on contact between the student and a parent or another person, please attach a copy of current Court Order or registered parenting plan that contains the limitation(s).

Signature Date

Name

FORM B: SENIOR PROGRAM APPLICATION FORM (see page 6-7)

(Please print clearly. Please make a copy to keep.)

FAMILY NAME		CHILD'S FIRST NAME	
AGE as at 1 Jan 2010	GENDER	SCHOOL YEAR IN 2010	
CAN YOU READ TREBLE CLEF? YES / NO	CAN YOU READ BASS CLEF? YES / NO	# OF YEARS AT SUMMER SCHOOL	
WOULD YOU LIKE TO ENROL IN SUMMER SCHOOL SPORTS (See page 8 for information)			YES / NO

Below, please list all instruments you currently play, how many years you've been learning; your AMEB grade (if applicable); your teacher; and whether you own an instrument you can bring to Summer School (for pianos and drums we provide instruments). If you play more than one instrument, list your favourite first.

INSTRUMENT	YEARS	AMEB	OWN ONE?	TEACHER
			Yes/No	
			Yes/No	

Select your general electives starting with the category you're most interested in (eg: Beginner Instrument), and your first preference in that category (eg: A -cello). Please also include two other choices from the same category in case your first preference is un-available (eg: B - Guitar Level 2, C - Bassoon). Be sure to complete the information and instrument columns, indicating what instrument you will be playing in each elective, and if you need to hire this instrument (see example on page 7).

	Category	Elective Choices	<u>Instrument</u> Please specify which instrument you will be playing if applicable.	<u>Instrument Hire</u> Do you need to hire an instrument for this class? Which size?
1		a.		
		b.		
		c.		
2		a.		
		b.		
		c.		
3		a.		
		b.		
		c.		
4		a.		
		b.		
		c.		

FORM C: ADVANCED PROGRAM APPLICATION FORM (see page 8)

(Please print clearly. Please make a copy to keep.)

FAMILY NAME		CHILD'S FIRST NAME
AGE as at 1 Jan 2010	GENDER	SCHOOL YEAR IN 2010
THEORY GRADE (If applicable)		NO OF YEARS AT SUMMER SCHOOL
WOULD YOU LIKE TO ENROL IN SUMMER SCHOOL SPORTS (See page 8 for information)		YES / NO

Below, please list all instruments you currently play, how many years you've been learning; your AMEB grade (if applicable); your teacher; and whether you own an instrument you can bring to Summer School (for pianos and drums we provide instruments). If you play more than one instrument, list your favourite first.

INSTRUMENT	YEARS	AMEB	OWN ONE?	TEACHER
			Yes/No	
			Yes/No	
			Yes/No	

Please rank from 1-3 your preferred **PERFORMANCE** class:

CLASSICAL
 JAZZ
 FOLK
 MUSICAL THEATRE

Please rank from 1-3 your preferred **CREATIVE** class:

SONGWRITING
 COMPOSITION
 JAZZ IMPROVISATION

Please rank from 1-3 your preferred **BEGINNER** class:

VIOLIN
 SAX
 FLUTE
 HARP
 DOUBLE BASS

Are you comfortable singing in a group?

YES
 NO

PLEASE LIST TWO OF YOUR FAVOURITE PIECES THAT YOU ARE CURRENTLY LEARNING. SELECT WORKS WHICH ARE CHALLENGING FOR YOU – THEY CAN BE EITHER GROUP OR SOLO PIECES.

THIS WILL GIVE US A GUIDE IN SELECTING REPERTOIRE FOR YOU TO PERFORM IN GROUPS:

1.
2.

ANY COMMENTS:

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FORM D: JUNIOR PROGRAM APPLICATION FORM (see page 5)

(Please print clearly. Please do not use staples.)

FAMILY NAME		CHILD'S FIRST NAME	
AGE as at 1 Jan 2010	GENDER	SCHOOL YEAR IN 2010	
CAN YOU READ TREBLE CLEF? YES / NO	CAN YOU READ BASS CLEF? YES / NO	# OF YEARS AT SUMMER SCHOOL	
DID YOU PLAY AN INSTRUMENT THIS YEAR? YES / NO		IF YES, WHAT IS IT?	

Please rank 1-3 your preferred Beginner Instrument

Choice	Electives	Instrument Hire (Yes / No)
	Beginner Violin	Yes / No
	Beginner Cello (School year 3 - 4 in 2010)	Yes / No
	Beginner Recorder	Please supply your own descant recorder.
	Beginner Guitar (School year 3 - 4 in 2010)	Yes / No
	Beginner Keyboard	A keyboard lab will be set up for classes at Summer School.
	Beginner Fife (School year 1-4 in 2010)	Please supply your own fife.

If your child would like to be in the same class as a friend, please specify below:

My child (child's name).....would like to be in the same class as

(friend's name)..... if possible. (Only 1 choice of friend)

ANY COMMENTS:

.....

.....

FORM E: PAYMENT (see page 3)

(Please print clearly. Please do not use staples.)

FAMILY NAME
FAMILY ID (if known)

Please complete the following Fee Schedule:

		Total \$	Deposit \$	Balance \$
2010 YMS Family Membership (renewable 1 January each year)		\$30	\$30	\$0
Summer school fees:	Child's name			
First child @ \$460		\$460	\$100	
Each additional child @ \$440				
<i>(Required deposit for each child is \$100)</i>				
T-shirt payment @ \$22 each (Must be paid with deposit)				\$0
TOTAL				

The Deposit must be paid upon submitting the application – see payment details below. The Balance must be paid by 1/12/ 09.

INSTRUMENT HIRE CANNOT BE PAID UNTIL YOU RECEIVE A CONFIRMATION LETTER

If you are ordering a T-Shirt please indicate the size(s) below. There are no refunds or exchanges so please order a size up. T-Shirts orders and payment must be returned with the initial deposit.

Youth XXS	Youth XS	Youth S	Youth M	Youth L	Youth XL
6	8	10	12	14	16
—	—	—	—	—	—

Adult Sizes:

XS	S	M	L	XL	XXL	XXXL
—	—	—	—	—	—	—

All cheques and money orders should be made payable to Young Music Society.
For Direct Deposit details, contact the Administrator at admin@youngmusicsociety.org.au

After you have completed the checklist on Page 3 of the Information Booklet, post applications to:

The Young Music Society
PO Box 929
Woden ACT
2606