



Shoalhaven Youth Orchestra (SYO) Inc.

Tuning In!

Registration Form – Stringlets 2018

PERSONAL DETAILS

Parent details:

Name and Title: _____

Address: _____

Suburb: _____ Post Code _____

Telephone: (H) _____ (W) _____ (M) _____

Email: _____

Relationship to student: _____

Student details:

Surname: _____ First Name: _____

Date of Birth: _____ Gender: Please tick M.... F....

Please tick: VIOLIN [] CELLO [] SIZE : _____

INSTRUMENT SYO ID NUMBER: _____

If applicable, please provide information on medical conditions or diagnosed disorder/disability/delay your child has (this information will be treated in confidence): _____

PAYMENT DETAILS: \$220

Method of Payment (Please Tick) [] Direct Deposit [] Cheque [] Cash

*Direct Deposit details: Horizon Credit Union BSB: 802-124 Account Name: Shoalhaven Youth Orchestra Inc.
Account Number: 100073013*

Payments should be marked with your child's name.
Cheques and money orders should be made payable to Shoalhaven Youth Orchestra Inc.

Total Payment: \$ _____

Please return your completed registration form to:

Administrator Tuning In
PO Box 820
NOWRA NSW 2541
Or scan and email to
Liz Dolan - tuninginoffice@gmail.com

Enrolment Guidelines:

Fees are payable in advance.

There are no refunds or credits for students who fail to attend scheduled lessons. Teachers are not obliged to make up lessons a student does not attend or any lessons cancelled by a student.

Please sign to indicate your acceptance of these enrolment conditions.

Signature

Date.....

Name (please print)

PUBLICATION CONSENT
TUNING IN PROGRAMS

I hereby consent to _____
(Name of Child)

being filmed / photographed / interviewed for publication to promote Tuning In! and orchestra activities and/or events to be publishing in the following media:

(Please tick those boxes for which your consent is given)

- newspaper
- television
- radio
- website
- magazine / journal

Signed: _____ (To be signed
by a parent or guardian)

Date: _____