

Spokane Falls/Northeast Washington Music Educators Association

Elementary Honor Chorus 2011 Student Registration

November 19, 2011 – Eastern Washington University, Showalter Hall - Cheney, Washington

Please TYPE or PRINT legibly and complete ALL information.

1– COMPLETE THE FOLLOWING BASIC INFORMATION

Last name: _____ School district: _____

First name: _____ School: _____

Address: _____ School music teacher: _____

City: _____ Zip: _____ Music teacher home phone: (____) _____

Phone (____) _____ Music teacher e-mail _____

Parent(s)/guardian: _____ If you have special dietary needs, please explain _____

Preferred Vocal part: Soprano Alto _____

Sex: M F Age: _____ Grade: _____ T-shirt size- YM YL AS AM AL
(circle size for participating child)

2 – PLEASE PROVIDE EMERGENCY INFORMATION AND CONTACTS

Insurance company: _____ ID number(s): _____

Emergency contact: _____ Phone: (____) _____

Special health concerns: _____ Allergies: _____

Special medical information a doctor should know to treat this student in case of an emergency:

I am aware that in case of serious medical or disciplinary problems those in charge will do everything possible to reach me by phone at the number(s) listed. If I cannot be reached, I give them permission to proceed as deemed in the best interest of my son or daughter.

Parent/Guardian Signature: _____ Date: _____

3 – PLEASE INDICATE YOUR AWARENESS OF OUR EXPECTATIONS

All students are expected to follow common-sense guidelines of good behavior at all times. Rowdiness, destruction or defacing of property, use of alcohol or illegal drugs or any other inappropriate behavior will not be tolerated. Students are expected to follow the instructions of all adult supervisors at rehearsal. Students MUST be at all rehearsals and events for the entire scheduled time. Any student leaving at any time without prior permission from the Honor Chorus Manager will be disqualified from further participation in the activities. We, the undersigned, understand and will abide by this. Permission is granted for this student to appear on recordings and in photographs of the group's activities. (*Signatures REQUIRED*)

Participating student signature: _____ Date: _____

Parent/guardian signature: _____ Date: _____

4 – RETURN THIS FORM TO YOUR MUSIC TEACHER AND ARRANGE PROPER PAYMENT

The cost of participation in the EWMEA Elementary Honor Choir is \$35.

- The fee must be included with this application and paid by check.
- Purchase orders **WILL NOT BE ACCEPTED**.
- Applications received without payment **WILL BE RETURNED** and the student's participation may be cancelled.
- The parent/guardian is responsible for reimbursing EWMEA for any NSF fees if the check is returned from the bank.
- The **TEACHER** must send in all registrations together.
- Checks should be made out to EWMEA.

Cancellation refund policy:

- Once registration and payment has been received, **NO REFUNDS** will be given for any reason.

5 – MUSIC TEACHER, SEND THIS FORM WITH APPROPRIATE PAYMENT TO:

**Heather Brown
10105 E Cimarron Road
Spokane Valley, Washington, 99206**

IT MUST BE POSTMARKED BY October 7, 2011