

Adirondack Youth Orchestra Association Fall 2018/Spring 2019 Registration Form

Additional Information is available on-line at: www.ayoa.org

Please complete this form and mail it along with your check made payable to:
AYO, PO Box 1590, Plattsburgh, NY 12901

Student Name: _____ Student e-mail address: _____
Parent Name: _____ Parent e-mail address: _____
Address: _____ Home Phone: _____ Cell Phone: _____
Instrument (if applicable): _____ NYSSMA Level (instrument or voice): _____
Which school do you attend? _____ Graduating Year: _____
Private Teacher (if any): _____ Teacher phone: _____

Please circle which group(s) you are interested in joining:

\$100 membership fee for the year – Adirondack Youth Orchestra (AYO)

All of the following groups have a \$60 membership fee for the year

Adirondack Youth Middle Strings (AYM) Adirondack Youth Strings (AYS)

Adirondack Youth Voices: grades 8-12 (AYV) Adirondack Youth Chorus: minimum age 8 (AYC)

Total membership fee(s) from above = \$ _____

SUBTRACTIONS:

If this registration is for more than one group,
check here _____ and subtract \$10 from the membership fee.

If this is for a second or subsequent child,
check here _____ and subtract \$10 from the membership fee.

MEMBERSHIP FEE AFTER SUBTRACTIONS = \$ _____

I authorize the Adirondack Youth Orchestra Association (AYOA) to allow the reproduction of my child's name, likeness, image, voice and performance for the purpose of publicity. The AYOA may use its discretion to authorize members of the press to use photos or taped footage of my child. I approve the listing of the parent's e-mail address solely for communication of AYOA information, snow tree, etc. I acknowledge that more than two unexcused absences may prevent my child from performing in the concert. I also acknowledge that supervision is only provided in the rehearsal rooms during the specified rehearsal times.

Parent's Signature: _____ Date: _____