

REGISTRATION

National Philharmonic Summer Choral Institute 2009

Name: _____

Address: _____

Phone: _____ Email: _____

School (in Fall 2009): _____

Parents Name(s): _____

E-Mail: _____ Telephone: _____

Voice Part: soprano alto tenor bass/baritone

Grade in September 2009: 9 10 11 12 HS grad

Current/recent choir or other vocal group(s) – group name, director, and contact phone number:

Examples of works performed: _____

Name and phone number of private voice teacher and number of years of study (if any):

Other musical experience, instruments, or training:

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REGISTRATION DEADLINE: JUNE 15, 2009

Please mail this completed form, with a \$50 nonrefundable deposit, to:

National Philharmonic, attn: Summer Choral Institute,
The Music Center at Strathmore, 5301 Tuckerman Lane, Bethesda, MD 20852-3385

\$50 check, payable to National Philharmonic, is enclosed. (Balance of \$150 due by June 15. No refunds after July 1)

Please charge \$50 deposit to MasterCard Visa AmEx Discover

Card number: _____ Expiration: _____

Name on card: _____ Cardholder's phone number: _____

Cardholder's signature: _____