



## REGISTRATION FOR YOUTH BAND CAMP

Please fill out all areas. Once completed print out the form and include with payment.

Name of Participant: \_\_\_\_\_

Age: \_\_\_\_\_

Instrument(s): \_\_\_\_\_

Skill Level (Beginner/Intermediate/Expert): \_\_\_\_\_

Band Experience (Some/None): \_\_\_\_\_

Session(s) Attending: Session #1 (7/8-7/12), Session #2 (7/14-18), Both:

\_\_\_\_\_

Contact Name and Relationship (Parent/Guardian):

\_\_\_\_\_

Contact Phone & Email: \_\_\_\_\_

Other Information (Medical/Allergies/Social/Other):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Emergency Contact (Name/Phone/Relationship):

\_\_\_\_\_

Payments must be made by check payable to MARIST COLLEGE.

Send payments to:

Marist College, Music Dept. Attention YOUTH BAND CAMP, 3399 North Road, Poughkeepsie, NY 12601.

All payments must include a printout of the registration form.