

TRAVERSE

SYMPHONY

ORCHESTRA

## VIOLIN DAY 2019 Registration

Student Name

Parent/Guardian Name

Mailing Address

Email

City, State, Zip

Emergency Contact Name

Home Phone

Cell Phone

Emergency Contact Phone

What school do you attend?

Current Grade

**\$15 Registration Fee may be paid online at [TraverseSymphony.org/violin-day](http://TraverseSymphony.org/violin-day) or via check made payable to *Traverse Symphony Orchestra* and mailed to: Traverse Symphony Orchestra 300 E. Front St, Ste 230 Traverse City, MI 49684. To make a payment over the phone, please call the Symphony at 231-947-7120.**

Do you rent or own your instrument?

How long have you played violin?

Do you read music?

Do you take Private Lessons? If so, who is your teacher?

Would you like to perform in a masterclass for your group?

What piece(s) are you working on?

Please list any dietary restrictions

### Medical Information

Hospital/Clinic Preference

Physician's Name

Phone Number

Insurance Company

Policy Number

Allergies/Special Health Considerations

**I give permission for my child to attend Violin Day on May 18, 2019.**

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent's/Guardian's Signature

Date