

2016-2017 Registration Contract (Apr)

Chorister's Information

I am a... **New Chorister / Returning Chorister**

Last Name _____ First Name _____
 Address _____ City _____, WA Zip _____
 Main phone (_____) _____ Age _____ Grade _____ Birthdate (MM/DD/YYYY) _____
 School _____ District _____ School Music Teacher _____
 Chorister's E-mail Address _____ How did you hear about Vivace!/? _____

Parent/Guardian's Information

Last Name 1 _____ First Name 1 _____
 Last Name 2 _____ First Name 2 _____
 Address _____ City _____, WA Zip _____

If different from chorister's address.

Alt phone 1 (_____) _____ Alt phone 2 (_____) _____ Chorister Shirt size: _____ Pant size: _____

*Parent's E-mail Address(es) _____

*This email will be used to send out rehearsal changes, choir updates, and monthly statements. Please use an email that is checked frequently.

Yes / No I give permission to receive Vivace! reminders, updates, and information via Vivace's text message service, "Remind".

Yes / No Health concerns relevant to the chorister that Vivace! staff will need to know? (If yes, please complete our Medical/Travel form)

Who has permission to transport your chorister to and from regular rehearsals, besides Parents/Guardians?

Name _____ Relationship _____ Phone (_____) _____

Emergency Contact Name _____ Relationship _____ Phone (_____) _____

Please provide an emergency contact when parents/guardians cannot be reached.

I have read and understand the contents of this registration contract:

- I am the parent or the legally authorized guardian of the chorister.
- The use of my chorister's name, photographs and quotations in Vivace! Choral Program may be used in brochures, advertisements, and other related publications.
- This form is signed and delivered voluntarily and will remain in effect for the **2016-2017 season** or until the child no longer participates in the Vivace! Choral Program. A written notification stating withdrawal and a parent and chorister meeting with the Artistic Director is required before the chorister is released from the program.
- I understand and am fully responsible for **FULL** payment of my chorister's account.
- **NOTE:** In case of non-payment, or payments not received on time, the chorister may be excluded from rehearsal and/or performance.

If my chorister is placed in a Vivace! Choir, I have read and understand the following expectations as a Vivace! Parent:

- Choristers are required to attend all weekly rehearsals and performances on time. More than two (2) absences prior to a concert are not acceptable. Excessive absences may result in a non-performance at the next performance. The director **MUST APPROVE** all excused absences **PRIOR** to the date of the absence. **I will provide or arrange proper transportation to and from Vivace! each week for rehearsals and at each performance.**
- I understand that participation in a Vivace! Choir is an **ANNUAL** commitment. Vivace! **WILL NOT** pro-rate payments for missed rehearsals, performances or early withdrawal from the program. **I will agree to keep my chorister in Vivace! for the ENTIRE remainder of the season (April to June). If my child decides to withdraw early from the Vivace! season, I understand I am still fully responsible for full payment of my account for the entire year.**
- **PRACTICING** is critical for a Vivace! chorister to be prepared for his/her next rehearsal and performances. **I will encourage my chorister to practice their music each week at home.**
- Sheet music is very expensive. All sheet music is **LOANED** to the chorister for use during the season. **I understand and will pay for the replacement of sheet music that is lost or not returned by my chorister.**

By signing below, I have knowledge in receiving the Tuition and Fees form, agree to a tuition payment schedule stated on the Tuition and Fees form and the statements listed above.

_____ Adult Chorister or Parent/Guardian of a chorister (18 and younger)

_____ Date

FOR OFFICE USE ONLY:

1) Registration, Tuition & Fees	Amt pd: _____	Date pd: _____	2)Uniform	3)Music	5) Discounts	6) Data input
<input type="checkbox"/> \$30 non-refund aud fee pd (new) _____			<input type="checkbox"/> Pd _____	<input type="checkbox"/> Music # _____	Family Discount _____	____ Database
<input type="checkbox"/> \$40 non refund reg fee pd (all) _____			Type _____	4) Attendance	<input type="checkbox"/> TA: _____	____ Quickbooks
<input type="checkbox"/> Lump Sum (for full year) _____			Size _____	<input type="checkbox"/> Input	Notes	____ Remind
<input type="checkbox"/> Monthly payments will be: \$ _____				<input type="checkbox"/> Name badge		____ Constant Contact
<input type="checkbox"/> Notes _____						