



SASKATOON YOUTH ORCHESTRA, INC.
 Saskatoon Youth Orchestra, Saskatoon Strings, and Double Bass Program
 P.O. Box 21108, Saskatoon, SK S7H 5N9
 Telephone 306-955-6336 E-mail: admin@syo.ca

This information will be used only for the purpose of the Saskatoon Youth Orchestra Inc. carrying on its day to day business, and will be shared only with those agencies that have the authority to request it, such as the Saskatchewan Orchestral Association.

FORM 1112: **Application/Registration 2011- 2012 Season**

Program (circle one) SYO SSTR DB

Please Print:

Name: _____ Player Cell Phone _____
Please Print (underline the name you wish to be called)

Saskatoon Address _____ Post Code _____ Saskatoon Phone _____

Player E-mail address _____ Family E-mail address _____
Please Print clearly

Home Address _____ Home Phone _____
(if different than above)

Age (Sept.) _____ Birthdate _____ Male _____ Female _____ School _____ Grade/Year _____
year month day

Health Card Number: _____

Father's Name _____ Address _____ Phone _____
(first & last) (if same as above write SAME)

Mother's Name _____ Address _____ Phone _____
(first & last) (if same as above write SAME)

**If different, do you want information sent to both addresses? Yes _____ No _____*

Orchestral Instrument _____ Length of Study _____ years Level Reached _____

Orchestral Instrument Teacher's Name _____
 Home Phone No. _____ E-mail Address _____

Other Instruments you play and years of study and/or experience *e.g. Piano (4)*

Names of other current music teachers and areas of study *e.g. Piano/Rubenstein, Theory/Goldman*

Is your family part of the Suzuki program? Yes _____ No _____

If you have a conservatory standing, state the grade: Practical _____ Suzuki level _____ (if relevant)

Theory _____ Other programs _____

For entrance applicants: Briefly list your musical experiences including workshops, membership in other musical groups, awards, former teachers, special performances, etc..

For previous members: List recent experiences (since Sept. 2010).

I understand the expectations of membership in the Saskatoon Youth Orchestra or the Saskatoon Strings or the Double Bass Program, as outlined in 2011- 2012 Handbook, and I agree to participate accordingly. I will regularly spend time practicing my parts so that I am prepared when I come to rehearsal.

Applicant or Player signature _____ DATE _____

I have read about the responsibilities of membership and acknowledge responsibility for payment of fees and for family efforts in fund-raising and participation in other projects of the program. I will fulfill our volunteer obligations to the organization and I will allow my child to participate as required.

Signature of Parent or Guardian _____ DATE _____

I give permission to use, without fee, photos of the person named above for the purpose of promoting the youth orchestra programs _____ (Please initial)
 The name will not be published and the photos will be used for print and online promotion of SYO programs.

FOR OFFICE USE ONLY

Audition date _____ Auditioner(s) Carnegie Wilson Group: SYO SSTR DB

Returning member _____ New member _____ Probationary member _____ Spare list _____ Try again _____

Notes: _____