

**SUMMER MUSIC PROGRAM 2019**  
*at Baldwin Middle School 3211 Schreiber Place, Baldwin, NY 11510*

**REGISTRATION FORM (one form per student please)**  
**Please circle the program(s) you are registering for:**

**MUSIC     ART     THEATER**

**Student Name:** \_\_\_\_\_  
**Parent Name:** \_\_\_\_\_  
**Current School:** \_\_\_\_\_  
**School September 2019:** \_\_\_\_\_ **Grade:** \_\_\_\_\_  
**Student Address:** \_\_\_\_\_  
\_\_\_\_\_

**Parent's Phone #'s**                      **Home:** \_\_\_\_\_  
**Work:** \_\_\_\_\_                      **Cell:** \_\_\_\_\_

**Parent's Email Address:** \_\_\_\_\_

**Student's Instrument (music only):** \_\_\_\_\_

**Years of experience on instrument:** \_\_\_\_\_

**Is sibling participating? (please fill out separate form)**

**Yes:** \_\_\_\_ **Sibling's name:** \_\_\_\_\_

**Fees**

**Art        \$175    \_\_\_\_\_**

**Music     \$95     \_\_\_\_\_**

**Theater \$195   \_\_\_\_\_**

**TOTAL            \_\_\_\_\_ enclosed**

**Make out check payable to the "Atlantic Wind Symphony, Inc"**  
**Mail to: Atlantic Wind Symphony, P.O. Box 511, Sayville, NY 11782**