SOUTH FLORIDA YOUTH SYMPHONY, INC.

Sundays At: Miami Dade College North Campus Building 5000 2nd floor
11380 NW 27th ave. Miami 33167

Today's date _____

Training Class and Orchestra Membership / Audition ***APPLICATION***

PLEASE PRINT CLEARLY

Home Phone ( ) _____

CELLULAR (_____) _____

Student Cell (_____)_____

STUDENTS NAME_____ _____ AGE____ GRADE _____
LAST FIRST new school year

ADDRESS_____ _____ - _____
***City ZIP Code* Apt #_____**

Any Diagnosed Disabilities_____ Student Birth date_____ Ethnicity_____

PARENTS/ GUARDIAN NAME_ (Circle) mr / mrs _____ _____

PARENT E -MAIL_____@_____.____

STUDENT E -MAIL_____@_____.____

STUDENTS - Instrument _____ yrs. /mos. played - _#_____
(circle one)

Level: Beginner_____ Intermediate (1-2 years experience)_____ Advanced (3-4 years experience)____

STUDIED PRIVATELY- –Y -–N–– TEACHERS NAME_____ how long?_____
circle

SCHOOL YOU NOW ATTEND_____

SCHOOL BAND/ORCHESTRA DIRECTORS NAME (S)_____

LIST OTHER INFORMATION WE SHOULD KNOW ABOUT YOU, OTHER GROUPS YOU HAVE PLAYED WITH, OR ARE PLAYING WITH, CHURCH ACTIVITIES, SPECIAL TALENTS ETC. - on back:

Fees: Aug- May -One class - $500 - siblings at $395 Jan-May $250- siblings at $200
2nd class- $100

Credit cards ,money orders, checks accepted , Monthly payments optional , All fees are due by February 10th

Card #_____ exp. date_____ security code____ Name on card_____

Membership Deposit $100 per student DUE with Registration *PAID_____ DATE_____*
Student will not start classes until this fee is paid

Need Based *SCHOLARSHIP applications for remaining amounts will be considered after this fee is paid.* *No student is ever turned away because of financial concerns always contact us for information on help available.*
Call Mrs. Hahn, Executive Director at the SFYS Office at 305-238-2729
submit this form with deposit by email makemusic@sfys.net by paypal fee will be $105.00