**SOUTHWESTERN COLLEGE**

Violapalooza Registration Form

*Deadline for Registration: February 12th, 2016*

Return to Dr. Amber Peterson, 100 College St., Winfield, KS 67156

Include Registration Fee: $10.00 (non-refundable)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Circle 1 of the following:

HS Student Orchestra Director Private Teacher

Complete if applicable:

 Name of High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Grade \_\_\_\_ Years of Viola Study \_\_\_\_

 Current Orchestra Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Current Private Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any food allergies (Lunch & Reception will be provided.):

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| 1.  |
| 2.  |
| 3.  |
| 4.  |
| 5.  |
| 6.  |
| 7.  |
| 8.  |
| 9.  |
| 10.  |

 (For Teachers) Did you have 4 or more students registering? (All teachers who bring 4 or more students will be admitted free of charge.)

 \_\_\_ Yes \_\_\_ No

(For Teachers) Please list students. (All students who have successfully registered & paid will be counted.)

(For Students) Would you like to participate in the Master Class? (Pre-registration required.)

If interested in playing, please fill out the following questions. Selected students will be notified at least a week in advance.

\_\_\_ Yes \_\_\_ No

Composer’s Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Choose 1 movement or piece for the Master Class)