

STUDENT REGISTRATION FORM 2011 WVSTA STRING DAY
WVSU Campus, Davis Fine Arts Hall
Dr. Mitchell Arnold, Conductor

Student Information:

Name: _____ Instrument: _____

Grade: ___ School: _____

Director: _____ Private Teacher: _____

Part normally played in school (i.e. 1st or 2nd if violin): _____

Other musical group memberships: _____

Parent Agreement:

I hereby grant permission for my student _____ to rehearse and perform in all WV String Day Activities. I understand that it is parent responsibility for transportation and meals and that concert attire is all black for ladies and white shirts, black pants, and a black jacket for gentlemen.

Parent Signature: _____ Date: _____

Emergency Contact: _____ Phone: _____

Allergies: _____

Family Physician: _____ Phone: _____

Student Agreement:

I commit to preparing my part and complying with all directions, musical and non-musical.

Student Signature: _____ Date: _____

Please return this to your director by October 16, 2011 with your appropriate fee (\$10/student of an ASTA teacher or \$15/student of non-ASTA member) make checks payable to WVSTA. Directors, please send registrations by 10.16.11.

DIRECTOR REGISTRATION FORM 2011 WVSTA STRING DAY

Please use an additional sheet for additional schools.

Director: _____ School: _____

School Address: _____

Email: _____ Phone: _____

Time available to assist: _____

Student Tally:

Violin I

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

Violin II

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

Viola

1. _____
2. _____
3. _____
4. _____
5. _____

Cello

1. _____
2. _____
3. _____
4. _____
5. _____

Bass

1. _____
2. _____
3. _____
4. _____

Director:

Please return the tally form and individual registrations to:

Colleen Tan

803 Chappell Road

Charleston, WV 25304

tan.colleen@gmail.com

by October 16, 2011. We're looking forward to this exciting statewide collaborative event!