



Hawaii Youth Symphony

YOUTH SYMPHONY I

2010-2011 Registration Form

The completed forms & registration fees are due by Friday, **JULY 9, 2010**. FORMS POSTMARKED AFTER JULY 9 MUST INCLUDE A \$35 LATE FEE. Mail to: HYS, 1110 University Ave, Suite 200, Honolulu, HI 96826-1508.

Student Name _____
first middle last

Male Female Birth date _____ (month/day/year)

Address _____
city state zip

Home Phone _____ Student Cell _____ Student Email _____

School in 2010-2011 _____ Grade _____ Class of _____

Previous HYS Group _____ Total Years in HYS _____ Instrument _____

Private Music Teacher _____ Total years of lessons _____
first last

Sibling(s) in HYS (Name & Group) _____

Student lives with: Both parents Mother Father Other _____

	Father/Guardian	Mother/Guardian
Salutation (i.e. Mr. or Ms.)		
Name (First & Last)		
Occupation/Title		
Employer		
Work Phone		
Cell Phone		
Email		
Best form of contact (i.e. home phone, email)		

REGISTRATION FEES - All fees are NON-REFUNDABLE after the first rehearsal.

	Postmarked on or before July 9, 2010	Postmarked on or after July 10, 2010	Total
Registration Fee	\$460	\$495	\$
Credit Card Handling Fee (Only if making payment by credit card)	\$ 10 per applicant		\$
Tax Deductible Donation (Thank you!)			\$
		Total:	\$

PAYMENT METHOD (choose only one)

I am including full tuition payment with my registration forms.

I am including the Installment Payment Agreement with my registration forms (for credit card use only)

I am including 50% tuition payment with my registration forms and completed Financial Aid Application.

PAYMENT TYPE

CASH CHECK MASTERCARD VISA AMEX DISCOVER

CREDIT CARD: Name on Card: _____

Card # _____ Expiration Date ____/____ (month/year)

Signature of card holder: _____

CHECK: Check Number _____ Check Date _____ Check Amount _____ (There is a \$25 returned check fee)



CONFIDENTIAL INFORMATION

Release for Emergency Care

To whom it may concern:

- I hereby give my consent to any emergency facility and/or physician to administer any treatment that such facility or physician may deem necessary or appropriate to my child.
- In the event of an emergency during which I cannot be reached, I give consent to transport by ambulance if the situation warrants it.
- I understand that I will be responsible for all expenses associated with above medical treatment. I will defend, indemnify and hold Hawaii Youth Symphony and its officers, directors, agents, volunteers and attorneys harmless from and against any damages, liabilities, claims, costs or expenses arising from any such medical treatment.

Student Name: _____

Family Physician's Name: _____ Phone: _____

Physician's Address: _____

Medical conditions (i.e. allergies, asthma, etc.):

Medications currently taking: _____

Date of last DPT or Tetanus: _____

Medical Insurance Plan Covering Child: _____

Policy #: _____ Policy Holders Name: _____

Father/Guardian's Signature & Date

Mother/Guardian's Signature & Date

IT IS THE PARENT/GUARDIAN'S RESPONSIBILITY TO NOTIFY HYS OF ANY CHANGES IN THE ABOVE INFORMATION.

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PARENTS/STUDENTS: PLEASE READ CAREFULLY!

Parents must understand and agree to the following:

One of the aims of HYS is to promote the musical and personal development of its members by providing opportunities to learn and perform challenging orchestral music. My child has my permission to participate in HYS concerts. I agree to waive all claims against HYS for any injury or property damage that my child may incur. I also give permission for my child to participate in any HYS-sponsored recreational activities. I waive any claim, suit, or other legal action against HYS in the event that my child suffers any injuries as a result of his/her participation in any recreational activities.

I understand that all reasonable safety precautions will be taken at all times by HYS. I also understand the possibility of unforeseen hazards. In consideration of this minor's participation with HYS, I agree to indemnify and hold harmless HYS, its employees, volunteers, and agents, contracted or otherwise, from any liability for injury, diseases, or any damages resulting from said participation.

Volunteers must understand and agree to the following:

I understand that volunteers may be asked to assist with HYS related events. These events include, but are not limited to, providing general assistance at weekly rehearsals and concert events. I realize that volunteers may be asked to provide help in physically moving and setting up instruments and other orchestra equipment prior to or after rehearsals and concerts. I also realize that volunteers may be asked to provide help in the sales of merchandise, general office chores, taking attendance, running errands, answering questions and providing scheduling information. I waive any claim, suit, or other legal action against HYS in the event that I suffer any injuries as a result of participation in any HYS volunteer activities. I agree to release and hold harmless the HYS employees, volunteers, and agents, contracted or otherwise, from any liability for injury, diseases, or any damages resulting from my participation as a volunteer in any HYS sponsored activities. I agree that providing volunteer services at any HYS sponsored events constitutes good consideration for this release.

Students must understand and agree to the following:

Student musicians of HYS are expected to maintain high standards of personal conduct. The following behaviors are strictly prohibited: cigarette smoking; gambling; cohabitating; selling, possessing, consuming, or being under the influence of illegal drugs, narcotics, hallucinogens, or alcohol. Such behavior will lead to immediate expulsion from HYS.

As a member of HYS, I give permission to publish, distribute and/or display video and photographic images of me for archival and publicity purposes. I hereby release HYS and its photographer from any and all liability for use of my image in a single or composite form. I understand that the photographer and HYS can use any artistic procedure for composition needed to produce a product, publication or display, for promotional reasons.

I have read and understand all Hawaii Youth Symphony (HYS) policies outlined above. As a member of the HYS orchestras, I promise to abide by the Code of Ethics, Attendance Policy, and private lessons requirement outlined in this agreement and in the HYS handbook which we have read. I have reviewed all of this information with my parents/guardians. Our signatures indicate our compliance.

Father/Guardian's Signature & Date

Mother/Guardian's Signature & Date

Student's Signature & Date

PRINT Student's Name

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Please keep this page for your records.

CODE OF ETHICS

Student musicians of HYS are expected to maintain high standards of personal conduct. The following behaviors are strictly prohibited: cigarette smoking; gambling; selling, possessing, consuming, or being under the influence of illegal drugs, narcotics, hallucinogens, or alcohol. Such behavior will lead to immediate expulsion from HYS.

ATTENDANCE POLICY

A complete attendance policy is published in the Student Handbook, at www.HiYouthSymphony.org. Please review the Handbook carefully. In order to register, you must agree to adhere to the following requirements:

1. Members are expected to attend all rehearsals and concerts.
2. Only two absences are allowed per semester.
3. Any absence must have parental approval and must be cleared by your orchestra conductor.
4. Notification of absence should be made to the HYS office or concert parent at least 24 hours in advance.
5. Absences due to conflicts with school music activities *may* be excused. However, you must still notify your concert parent or the office.
6. Rehearsal and performance schedules are provided in advance so that you can plan accordingly.
7. It is the responsibility of the student and parents/guardians to arrange excused absences from school when a HYS event/tour occurs on a school day.

FINANCIAL AID & PRIVATE LESSONS

All YSI and YSII students are required to take private lessons; CO students are strongly encouraged to take lessons. Students also are strongly encouraged to participate in their school music programs. If funds are available, partial financial aid is awarded on the basis of need to assist students with private lessons, instrument rentals and/or registration. If a student qualifies, all financial aid funds are on a reimbursement basis. **You must register first before you apply for aid. If you are interested in applying for financial aid, you may download the application from our website at www.HiYouthSymphony.org, or enclose a self-addressed, stamped envelope with your registration forms and an application will be mailed to you.**

INSTRUMENT LIABILITY/INSTRUMENT RENTAL

String instruments are available for rent for the September through May season. Violins and violas are \$135 per season and cellos and basses are \$180 per season. You will need to pick up and pay for instrument rentals at the HYS office. If you need to rent an instrument, please call us at 941-9706 in order to confirm availability and arrange pick-up. **HYS claims no liability for student-owned instruments and highly recommends that parents obtain insurance through their homeowner's policy or other means.**

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Hawaii Youth Symphony
YOUTH SYMPHONY I
2010-2011 Student Profile

Please attach recent photo (head shot) here:
MANDATORY

Congratulations on being accepted to the Hawaii Youth Symphony! Your conductor would like to get to know you and asks that you complete this form and return it with your registration forms.

 Student's Last Name First Name Age Grade (10-11)

 Instrument School

1. What is the best phone number to contact you on Sundays for updates about HYS business only? (indicate whether you are providing a parents' cell phone number, home, etc.) _____

2. What other extra-curricular activities do you participate in? _____

3. Are you a member of your school's: Marching Band Other Band Orchestra Other music class (please list) _____

4. Are you planning any major trips during the 2010-2011 season (August-May)? Yes No
 If yes, when and where? _____

****Note:** Your conductor and concert parent should be advised of any future trips as soon as details are available.

5. What is your favorite subject in school? _____ least favorite? _____

6. Why did you join HYS and what are your expectations? _____

(please leave remainder of this form blank)



Hawaii Youth Symphony

2010-2011 PARTICIPANT DEMOGRAPHIC INFORMATION

The Hawaii Youth Symphony would appreciate if you would complete this short questionnaire and return it with your application. Participation in this survey is voluntary. Information is kept anonymous and confidential and used for grant purposes only. Mahalo for your help.

Where do you reside?

- Honolulu Central Oahu Leeward Oahu Windward Oahu
 Kauai Maui Molokai Hawaii

Your Zip Code: _____

Race/Ethnicity of Student. (check all that apply)

- American Indian or Alaska Native
 Asian: Chinese Filipino Indian Japanese Korean Thai Vietnamese Other Asian _____
 Black or African American
 Hispanic or Latino
 Native Hawaiian
 Other Pacific Islander _____
 White

Total Household Income

- <\$14,999
 \$15,000-\$29,999
 \$30,000-\$49,999
 \$50,000-\$74,999
 \$75,000-\$99,999
 \$100,000-\$149,999
 >\$150,000

Return to HYS, 1110 University Ave., #200, Honolulu, HI 96826 Many thanks for your time and help!



Hawaii Youth Symphony

2010 - 2011

OPTIONAL

Installment Payment Plan Agreement

(For Credit Card Payments Only)

Mail completed installment agreement with registration forms to: HYS, 1110 University Ave, Suite 200, Honolulu, HI 96826-1508. Installment agreements will be accepted until July 9 for the Symphony Program (CO, YSII, YSI) and until September 4 for the Academy Program.

Student Name _____ Group _____

Parents Name(s) _____

Address _____
city state zip

Phone _____ Parent(s) Email _____

Registration Installment Plan (choose one):

_____ **Youth Symphony I (YSI)**
Four Payment Plan (includes \$20 processing fee)
\$120 charged on: day registration forms are received, 8/1/10, 9/1/10 & 10/1/10

_____ **Youth Symphony II (YSII)**
Four Payment Plan (includes \$20 processing fee)
\$105 charged on: day registration forms are received, 8/1/10, 9/1/10 & 10/1/10

_____ **Concert Orchestra (CO)**
Four Payment Plan (includes \$20 processing fee)
\$95 charged on: day registration forms are received, 8/1/10, 9/1/10 & 10/1/10

_____ **Academy Program (BSE, ISE, SOE, CSO)**
Four Payment Plan (includes \$20 processing fee)
BSE & ISE - \$78.75 charged on: day registration forms are received, 10/1/10, 11/1/10 & 12/1/10
SOE & CSO - \$82.50 charged on: day registration forms are received, 10/1/10, 11/1/10 & 12/1/10

Payment Information:

CREDIT CARD TYPE: MASTERCARD VISA AMEX DISCOVER

CREDIT CARD: Name on Card: _____

Card # _____ Expiration Date ____/____

I authorize HYS to charge the credit card listed above, according to the option chosen above. I understand that tuition is non-refundable. If my credit card is declined, I agree to make other arrangements to pay my bill within 5 days.

Cardholder Signature

Date