



Registration Form for 2023-2024

Student's name _____

Date of Birth _____ Age _____

School attending _____ Grade Level _____

Previous choral experience or musical training (piano lessons, etc.):

Home address _____

City _____ State _____ Zip Code _____

Parent or guardian name _____

Daytime phone _____ Cell phone _____

E-mail address _____

Parent or guardian name _____

Daytime phone _____ Cell phone _____

E-mail address _____

Are there any personal circumstances of which I should be aware (special needs, allergies, health problems, etc?)

No _____ Yes _____ (I am enclosing a confidential explanation.)

Are there any concerns about who should pick your child up from rehearsal? If so, please include a confidential explanation.

No _____ Yes _____ (statement included)

Are there any family religious beliefs that might impact repertoire choices or performance dates?

If so, please explain: _____

Who may we thank for referring you to us? _____

Which choir will your child be joining?

____ Apprentice Choir, ages 4-8, for new vocalists: Rehearsals on Thursdays, 6-7 PM, at the Church of Jesus Christ of Latter-Day Saints, 4560 Padgett Rd, White Plains

____ Concert Choir, ages 9-14, for intermediate vocalists: Rehearsals on Thursdays, 7-8:15 PM, at the Church of Jesus Christ of Latter-Day Saints, 4560 Padgett Rd, White Plains

____ Chamber Choir, ages 12-16, for vocalists with musical training and choral experience: Tuesdays, 7:15-8:15 PM, at the Spring Dell Center (6040 Radio Station Rd, La Plata)

If you are uncertain of which choir would be appropriate for your child, please email us at info@childrensvoicessomd.org and we will work with you to find the perfect fit.

T-Shirt Size

We will provide a T-Shirt to be worn at performances. Please indicate your child's t-shirt size here:

Youth Sizes: YXS____ YS____ YM____ YL____ Adult Sizes: S____ M____ L____ XL____

Materials Fee **

Students will need \$100 for a year's supplies (September through April) and \$60 for a partial year (January through April). This fee covers music, binder, backpack, t-shirt for performances (only), teaching aids, concert expenses, administrative fees, insurance, and choir equipment. This fee must be paid along with registration. Your payment of this fee is a sign of commitment from you, allowing your child to fully participate in CVSM.

Family Rate: \$200/year or \$120/partial year for 2 or more choristers

Please indicate your method of payment:

____ Cash at first rehearsal

____ Check (payable to CVSM) at first rehearsal

____ CashApp: \$ChildrensVoices

____ PayPal before first rehearsal (through info@childrensvoicessomd.org)

____ Alternate payment plan

IMPORTANT

- I have read and agree the guidelines of Children's Voices of Southern Maryland available on the CVSM website.
- The Registration form must be turned in with the materials deposit.
- Payment may be made with cash, checks payable to CVSM, or through PayPal (through info@childrensvoicessomd.org).**
- Refunds and credits will not be made for rehearsals missed or early departure from the choir.
- I accept full responsibility for my child while attending CVSM events. I will not hold CVSM liable for any injury that my child may obtain while attending CVSM rehearsals, activities, and performances.
- Photographs and videos of choristers taken at rehearsals and at CVSM events may be used in print and electronic media, including newspapers and the internet. Parents who do not want photographs or videos of their children used in print and electronic media should notify CVSM in writing by the second scheduled rehearsal of each CVSM term.

(Signature of Parent, Guardian, or Adult Student)

Date

** If you would like to discuss an alternative payment plan or would like to request a partial or full scholarship for your child, please contact Ms Georgia at info@childrensvoicesomd.org with an explanation of your circumstances. It is our desire that every child should have the opportunity to participate in CVSM.