



# 2009 - 10 Musician's Participation Form

Please check one:

- I, \_\_\_\_\_ (student name) accept my placement in \_\_\_\_\_ for the 2009 - 10 season.
- I, \_\_\_\_\_ (student name) **do not** accept my placement in \_\_\_\_\_ for the 2009 - 10 season. If so, please tell us why below. You may also email us at mail@gtcys.org or call us at 612-870-7611 if you would like to discuss this further.

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Please read the following and sign below.

In order to ensure a high quality educational program for myself and all GTCYS members, I will honor my commitment. I understand that GTCYS is a year-long educational program that is cumulative, and that I am expected to remain a member for the entire season. I agree that:

1. I will follow all policies and procedures of the organization, and attend all GTCYS rehearsals, concerts, and other activities as outlined in the schedule. My parents and I will work together to minimize conflict with testing dates, college visits, etc. I will have my instrument, music, pencil, stand, and required accessories such as reeds, mutes, extra mallets, etc. at all GTCYS activities as required.
2. In order to be an effective member of my ensemble, I will come prepared at all times, having practiced outside of rehearsals.
3. I will make myself familiar with, and abide by, GTCYS' policies and procedures outlined in the Orchestra Handbook.
4. I will pay all fees by the deadlines outlined on the invoice. I have read and agree to the following refund policy:  
First semester tuition may be refunded (pro-rated by rehearsal) to withdrawing students until 5:00pm on Friday, September 25, 2009, less a \$40 withdrawal fee. No refund for first semester will be given after this date. Second semester tuition (pro-rated by rehearsal) may be refunded until 5:00pm on January 15, 2010, less a \$40 withdrawal fee. No refund for second semester will be given after this date. Retreat and processing fees are non-refundable and sibling discounts will be recalculated for withdrawing siblings.

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Musician's Name Printed	Musician's Signature	Date
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Parent/Guardian's Name Printed	Parent/Guardian's Signature	Date
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**This signed participation form and payment must be received on or before July 10, 2009 to guarantee your place.**

Optional questions: please check the box(es) if you are...

... interested in participating in special projects (e.g. performing for special events, mentoring students, etc.).  Yes, I'm interested.

... a member of a chamber music ensemble which is interested in performing at special events.  Yes, I'm interested.