

Santa Cruz County Youth Symphony
REGISTRATION

Musician Name (last/first)	/
	Instrument
Street Address	/
	City
Date of birth	/
Student home phone	/
	Student Email
Private Music Teacher's Name	/
	Private Music Teacher's Phone
School (2010-2011)	/
	Grade (2010-11)
	/
	Joined SCCYS in (year)

Do participate in your school's music program? Yes/No If not, why not?

Mother/Guardian's Name	Father/Guardian's Name
Home Address	Home Address
City/State/Zip	City/State/Zip
Email	Email
Home phone	Home phone
/ Work phone	/ Work phone
Cell phone	Cell phone
Occupation	Occupation
Employer	Employer

May we publish your home contact information in a SCCYS membership directory? The directory is for member use only Yes/No

I have read and agree to abide by the conditions of membership of the **Santa Cruz County Youth Symphony** as stipulated in the *SCCYS Handbook*. I understand that this contract is binding for one complete season.

Parent/guardian signature	/
	date
Musician member signature	/
	date

Santa Cruz County Youth Symphony
EMERGENCY AUTHORIZATION

_____/_____/_____ Musician Name (last/first/middle)		_____ Instrument
_____ Street Address		_____ City
_____ Date of birth		_____ Student home phone
_____ Mother/Guardian's Name	_____ Father/Guardian's Name	
_____ Home Address	_____ Home Address	
_____ City/State/Zip	_____ City/State/Zip	
_____ Home phone	_____ Home phone	
_____ Work phone	_____ Work phone	
_____ Cell phone	_____ Cell phone	

INFORMATION FROM PREVIOUS YEARS IS NOT MAINTAINED
THE FOLLOWING INFORMATION IS REQUIRED

Persons to call if parents cannot be reached:

_____ Name	_____ phone	_____ relationship
_____ Name	_____ phone	_____ relationship
_____ Family Physician	_____ phone	
_____ Health Insurance Co.	_____ Policy #	

Please list any physical or behavioral conditions of which the Youth Symphony staff should be aware. (asthma, epilepsy, fainting, allergies, nose bleeds, etc.) Please be specific.

In case of emergency due to serious illness or injury when I cannot be contacted, I give my permission to the staff of the Santa Cruz County Youth Symphony to authorize emergency medical attention to my child.

_____ Parent/guardian signature	_____ date
------------------------------------	---------------

V. Use the space below to describe the reason(s) you are requesting financial assistance. If you feel that there are any unusual circumstances that should be considered, please explain.

VI. **Attach a copy of your most recent Tax Return Statement** (front page only) and anything else that you think may help you establish proof of income. *You may block out your Social Security Number.*

VII. I certify that the information given in this application is complete and correct.

Financially responsible Parent/Guardian signature _____ / date

Santa Cruz County Youth Symphony
PARENT / GUARDIAN PARTICIPATION

Note: Please read, sign, and return a copy to SCCYS for the 2009-2010 season.

Member family participation is extremely valued and essential to the continued success of SCCYS. Tuition covers less than a quarter of the cost of operating the orchestra. Participation by SCCYS families in our fundraising activities is essential, and it keeps tuition to a minimum for each family. Each family is expected to raise \$200, to obtain non-cash equivalent donations equal to \$200, or to contribute 20 hours of volunteer time during the season (or combination of the options).

For the 2009-2010 season, participation will be tracked, and each member family will receive a reminder mid-season.

There are numerous ways in which to meet the season requirement; some could even be fun! And we are open to new and creative offers of assistance as well. We believe this to be the most flexible and fair plan of any youth orchestra in the region.

NON-CASH OPTIONS

- **Volunteering** for one of the Big Jobs will satisfy the requirement in full.

These include:

- Volunteer Coordinator
- Snack Coordinator
- Fundraising / Events Coordinator
- Rehearsal Manager
- Marketing / Advertising Efforts
- Ensemble Event/Outreach Coordinator
- Board member
- Web site maintenance
- Bookkeeper

- Other non-cash options include:

Securing donations (individual and corporate), sponsorships, or in-kind donations from the community.

Selling concert program ads. SCCYS uses concert advertising and sponsorships as fundraising mechanisms for each concert. Selling ads to businesses where you are a frequent client or customer is remarkably easy, especially if your young musician makes the request. If you are interested in placing an advertisement for your company or to simply congratulate your child on their performance, please contact the SCCY office.

In-kind donations. e.g., office supplies, needed equipment, etc.

Participation in the eScrip program. If you decide on an eScrip credit card, this can add up to hundreds of dollars for SCCYS per year potentially. Even if you do not choose an eScrip credit card, you can register with eScrip for a painless way to make continuing contributions to SCCYS. Every time you shop at a participating merchant, SCCYS receives a cash contribution. It's automatic, and we can potentially receive hundreds of dollars from your family's participation alone. If you are already signed up and making a contribution to another group, you can use the Add/Change form to add us to your donation recipients. You specify what percentage of each donation goes to each group.

Use your **New Leaf Community Card** when you shop. New Leaf will return a percentage of the money you spend at their three downtown locations every time you shop.

Participation in fundraising events counts toward the requirement, including food donations, entry fees, silent auction items, door prizes, etc.

CASH OPTIONS

- We need each family to contribute as they are able to our **Challenge Grant**. When we request donors and foundations to support our program, it is very important to be able to state that all SCCYS families support our program in addition to paying tuition. Every donation makes a difference. Generous donations come in all sizes, are tax deductible, and all gifts are acknowledged in our program books. If 100% of SCCYS families donate by October 31, the orchestra will receive an additional \$1,500 through a Challenge Grant offered by Monarch Music.
- If a family prefers to opt out of any of the above options, then payment of \$200 will satisfy the entire season requirement.

TICKET SALES

- Each member family is **REQUIRED** to sell a **minimum of 5 tickets** for both the Fall and the Spring concerts (for a minimum of 10 tickets). All of your advance ticket sales will apply to your family's participation record.

Thank you for helping to keep SCCYS programs a success !!

I have read and agree to to these efforts to support the **Santa Cruz County Youth Symphony**. I understand that this contract is binding for one complete season.

_____/_____
Parent/guardian signature date

_____/_____
Musician member signature date