

Santa Cruz County Youth Symphony
REGISTRATION

_____ Musician Name (last/first)		_____ Instrument
_____ Street Address	_____ City	_____ Zip
_____ Date of birth	_____ Student home phone	_____ Student Email
_____ Private Music Teacher's Name		_____ Private Music Teacher's Phone
_____ School (2009-2010)	_____ Grade (2009-2010)	_____ 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	_____ Zip
_____ 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
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Santa Cruz County Youth Symphony
PLANNED ABSENCE FORM

_____/_____
Musician Name (last/first) Instrument

_____/_____
Absence date Reason for absence

Student signature

Parent signature

Santa Cruz County Youth Symphony
PLANNED ABSENCE FORM

_____/_____
Musician Name (last/first) Instrument

_____/_____
Absence date Reason for absence

Student signature

Parent signature

2009-2010

Santa Cruz County Youth Symphony

FINANCIAL AID APPLICATION

Please complete the following form to be eligible for assistance.

All information on this form and attached documents will be kept confidential.

_____/_____/_____
Musician Name (last/first) Instrument Date of birth

_____/_____
Mother/Guardian's Name Father/Guardian's Name

I. Parent/Guardian Employment Information

Name of financially responsible parent/guardian _____

Number of family dependants and ages _____

Occupation _____ Employer _____

Annual Employment Income _____ Other Income _____

Name of second financially responsible parent/guardian _____

Number of family dependants and ages _____

Occupation _____ Employer _____

Annual Employment Income _____ Other Income _____

II. Aid Requested: _____

SCCYS tuition does not cover the full cost of participation in the orchestra program. Our board and staff work hard to solicit funds to help cover these costs. Please select a financial aid amount that allows you to participate to the best of your ability. Most awards are in the \$50 - \$200 dollar range, but larger awards are possible in extreme cases of need.

III. Does your child qualify for his/her school's lunch program? YES NO

IV. Does musician study privately? YES NO Fee per lesson _____ Frequency _____

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

Season Schedule
PLEASE MARK YOUR CALENDARS NOW!

Auditions Thursday, September 8 UCSC start at 3:30 and go into evening
Concerto Competition September 8 GBK at 4 PM

Parent Meeting September 20 (REQUIRED) 6:30-8:30 PM

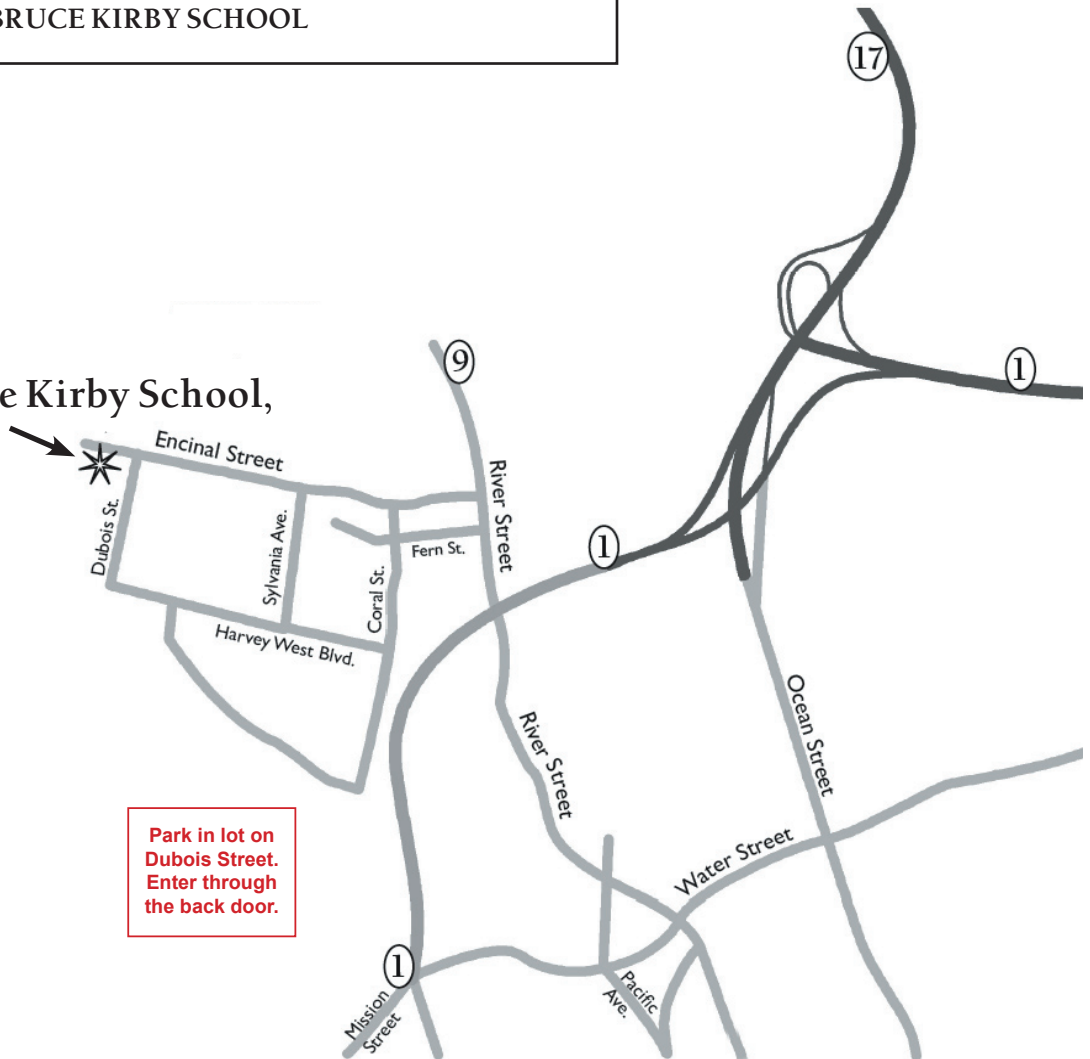
Fall Concert: November 8, 2 PM, at the UCSC Recital Hall
Rehearsals: Sept. 13 20 27; Oct. 4 11 18 25; Nov. 1

Children and Family Concerts: March 1, 2, 6, 7 with the Santa Cruz county Symphony
Rehearsals: Nov. 15 22; Jan. 3 10 17 24 31; Feb. 7 14 21 28 (28 is required for participation)

Spring Concert: May 2, Mello Center
Collaboration with Youth Music Monterey Honors Orchestra
Rehearsals: March 14 21 28; April 11 18 (No rehearsal Easter 4/4)
Dress rehearsal **Saturday** April 24; 10AM -12:30PM

ALL REHEARSALS WILL BE SUNDAYS FROM 6:15 UNTIL 8:30
AT GEORGIANA BRUCE KIRBY SCHOOL

Georgiana Bruce Kirby School,
425 Encinal Street
Santa Cruz



Santa Cruz County Youth Symphony

Parent / Guardian Participation

Member family participation is extremely valued and essential to the continued success of SCCYS. Tuition covers less than a third 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). The volunteer form submitted for registration is a sample of volunteer duties available for hours credit.

For the 2008-2009 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 Include:

- Volunteering as one of the major volunteer coordinators will satisfy the requirement in full.
These include: Volunteer Coordinator
Snack Coordinator
Fundraising / Events Coordinator
Rehearsal Manager
Marketing / Advertising Efforts
Ensemble Event Coordinator
 - 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 SCCYS office.
 - All advance ticket sales you can make for our Fall and Spring concerts.
 - 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 Include:

- 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 26, the orchestra will receive an additional \$1,000 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.

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