



2019 HarmonyFUSION Youth Festival STUDENT APPLICATION FORM

Please complete the top portion of this form, along with your Parental/Emergency Form. The non-refundable application fee per student is \$20 (personal check, school check, or money order payable to "Scottsdale Chorus") if postmarked before midnight **June 14, 2019** or \$25 after June 14. Mail forms and fees to **Scottsdale Chorus c/o Lauren Altieri, 3001 E Rockwood Dr., Phoenix, AZ 85050** or scan completed forms and email to **harmonyfusion@scottsdalechorus.org**, and send payment to the address above.

School: _____

Instructor: _____ Email: _____ Cell Phone: _____

Applicant's Name: _____ Date of Birth: _____

Address: _____ City/State: _____ Zip Code: _____

Cell Phone: () _____ Grade, Fall 2019 (circle one): 9 10 11 12 Other: _____

T-Shirt Size (circle one): S M L XL XXL XXXL Voice Part: _____ [] Male [] Female

Applicant's Statement of Obligation: I understand that if I am accepted as a singer in this Festival, I will be prepared musically, mentally and physically at the rehearsal and performance and I will represent my school with appropriate demeanor.

Applicant's signature: _____ Date: _____

PARENTAL PERMISSION & EMERGENCY MEDICAL FORM

Participant's Name: _____ has my permission to participate in the 2019 Harmony Fusion Youth Festival on August 17, 2019 and I understand that neither the Scottsdale Chapter, nor their members assume liability for any accident or illness that may occur during the event. I hereby authorize the Festival coordinators to arrange for any necessary medical treatment in the event of a medical emergency. **In case of emergency, please contact:**

Name of Emergency Contact: _____ Phone: _____ Relationship: _____

Parent/Guardian (PRINT): _____ Phone: _____ Date: _____

The participant will be traveling to and from the event at Chandler Center for the Arts with (check one):

- Parent or Guardian
- Other Adult Supervision (Specify: _____)
- Student is authorized to drive (Parental signature required _____)
- I hereby authorize the Festival coordinators to photograph my child(ren) for publicity in group activities related to the program.

Medical Information - Please inform us of any special medical conditions: (Attach pages as needed.)

Medication Allergies: _____ Food Allergies: _____

Parent Signature: _____



2019 HarmonyFUSION Youth Festival SCHOOL APPLICATION FORM

School: _____ Date: _____

Instructor: _____ Work/School Phone: _____

Cell Phone: _____ Email: _____

School Address: _____ City/State: _____ Zip Code: _____

Name badges and T-shirts will be provided for Students and Choral Directors.

T-Shirt Sizes available are: S M L XL XXL XXXL

Please indicate voice part of Tenor, Lead, Baritone or Bass for each student as well as gender (Male/Female.)

Please provide one Instructor or School Chaperone per 10 students for supervision during the entire day.

Participant	Name (Please PRINT)	Vocal Part	T-Shirt Size	M/F
Choral Director	Listed above. Attending All Day: YES () NO () Attending Music Education Class: YES () NO ()			
Chaperone (as needed)		-----	-----	
1. Student				
2. Student				
3. Student				
4. Student				
5. Student				
6. Student				
7. Student				
8. Student				
9. Student				
10. Student				

The non-refundable application fee per student is \$20 (personal check, school check, or money order payable to "Scottsdale Chorus") if postmarked before midnight **June 14, 2019** or \$25 after June 14. Mail School Application form, ALL Student Application/Parental/Emergency forms and fees to **Scottsdale Chorus c/o Lauren Altieri, 3001 E Rockwood Dr., Phoenix, AZ 85050, or scan and email forms to harmonyfusion@scottsdalechorus.org** and send payment to the address above. Please list additional students on an additional form.