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CO SB SY CM

1556 Third Avenue, Suite 601 • New York, NY 10128 • (212) 410-0370 • www.isorch.org

2009-2010 STUDENT REGISTRATION FORM

Thank you for your interest in the InterSchool Orchestras of New York. Please take this opportunity to introduce yourself to us by carefully filling in all relevant spaces and PRINTING CLEARLY. Mail this form to the ISO Office at the above address, along with the MANDATORY REGISTRATION FEE, and we will contact you shortly thereafter to schedule an audition. For answers to any questions you may have, please refer to the ISO Brochure, Guidelines for Admission and our website, www.isorch.org.

APPLICANT INFORMATION

APPLICANT NAME (Last) _____ (First) _____ Male Female

ADDRESS (Street/Apt. #) _____ (City) _____ (State) (Zip) _____

HOME PHONE _____ CELL PHONE _____ EMAIL _____

BIRTH DATE / / AGE FALL '09 _____ GRADE FALL '09 _____ PRIMARY INSTRUMENT _____

SCHOOL ATTENDING (2009-2010) _____ SCHOOL ADDRESS _____

PARENT/GUARDIAN INFORMATION

APPLICANT NORMALLY LIVES WITH: BOTH PARENTS MOTHER FATHER OTHER: _____

MOTHER/GUARDIAN NAME _____ EMAIL _____

ADDRESS IF DIFFERENT FROM ABOVE (Street/Apt. #) _____ (City) _____ (State) (Zip) _____

HOME PHONE _____ CELL PHONE _____ WORK PHONE _____

EMPLOYER _____ POSITION _____

FATHER/GUARDIAN NAME _____ EMAIL _____

ADDRESS IF DIFFERENT FROM ABOVE (Street/Apt. #) _____ (City) _____ (State) (Zip) _____

HOME PHONE _____ CELL PHONE _____ WORK PHONE _____

EMPLOYER _____ POSITION _____

EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT (Name) _____ RELATIONSHIP _____

DAYTIME PHONE _____ EVENING PHONE _____ CELL PHONE _____

Musical Information

PRIMARY INSTRUMENT _____ YEARS PLAYED _____

PRIVATE OR MUSIC SCHOOL _____

INSTRUMENTAL TEACHER _____ SCHOOL NAME _____

ADDRESS (Street/Apt. #) _____ (City) _____ (State) (Zip) _____

PHONE _____ EMAIL _____

For how many years have you been studying with the above teacher? _____

Please call the ISO Office if you would like help in searching for a private teacher!

Please list the studies and repertoire that you have worked on during the last year: _____

Please list any secondary, or doubling, instruments and length of study. (If none leave blank) _____

Outside of school, have you played with any other ensembles **in the last two years**? _____

If so, which ones? _____

Outside of school, which other ensembles are you auditioning for or playing with **this year**? _____

Will you have any other commitments, **including sports**, which may interfere with regular attendance on any particular day of the week? If so, give details: _____

Marketing Information

How did you hear about ISO?

Teacher/School: *Name* _____ Friend/Family: *Who?* _____

Internet: *Site* _____ Other: _____

Chamber Music Information

(Complete this section only if you are interested in participating in chamber music.)

Are you interested in playing with an ISO Chamber group? _____

(You do not have to be in one of the orchestras to participate in Chamber Music.)

What chamber work(s) have you most recently studied, and where? (If none, write "NONE.") _____

Please list your times of availability for rehearsals (Mondays through Fridays between 4 and 8 PM.) _____

Note: Your placement in a chamber ensemble depends upon the other applicants' instruments and level of ability. Groups are composed of students at similar ability levels who play compatible instruments. For that reason, although we encourage your application and audition, we cannot guarantee your placement in a chamber ensemble.

Publicity Release

I authorize ISO to use this student's name and photograph in publicity and press material relating to the InterSchool Orchestras of New York: (Name and signature of student 18 years or older; a parent must sign for students under 18 years of age.)

Student/Parent name (print)

Signature

Date

Membership Statement of Commitment

Please read carefully before signing.

I, _____, will accept the placement decision of the audition adjudicators. I understand that I have two weeks following notification of the audition results during which I may withdraw. Thereafter I commit myself to my assigned orchestra, band, or chamber group, and to:

- ❖ regular attendance at weekly rehearsals (3 excused absences per year maximum, with two weeks' notice required, except in the case of illness);
- ❖ being present, tuned and ready to play at least 15 minutes before the scheduled start of my rehearsal;
- ❖ participation in all concerts, assembly programs and special events that may be scheduled for my orchestra or chamber group;
- ❖ notifying the ISO office and my conductor or chamber music coach of **any** absence at least two weeks in advance of a missed rehearsal, and submitting a signed absence slip from my conductor to the ISO office;
- ❖ **replacing myself with another player** should my absence require it, and **at my own expense** should my attendance record or failure to give adequate notice make this necessary.

I understand that my failure to fulfill my commitments to ISO may result in probationary status or loss of my seat in the orchestra or chamber group. If I remain in good standing in my ensemble, I will expect to take part in all performances and to receive upon request written acknowledgement for my school or college record of my achievements during the current academic year.

Student name (print)

Student signature

Date

Parent Statement

I understand that I am responsible for:

- ❖ reading and ensuring that my child understands ISO's Orchestra Handbook (to be distributed at the start of the school year), which describes in detail his/her responsibilities;
- ❖ payment of tuition in full before the first orchestra rehearsal, OR payment in accordance with the terms of one of the payment plan options (see enclosed "Fees and Tuition" sheet); OR
- ❖ completion of the scholarship application (available online at www.isorch.org or from the ISO office).

Parent name (print)

Parent signature

Date

Fees and Tuition

Each applicant for Chamber Music, Symphonic Band, Concert, Carnegie Hill, Morningside or ISO at Turtle Bay Orchestras must submit a non-refundable \$150 registration fee with this application form. **Applicants admitted into the ISO Symphony (tuition-free ensemble)** will be billed the registration fee of \$250. Those students re-auditioning to secure their place in the Symphony are required to pay the \$250 application fee up front. Please make checks payable to **ISO**. If you choose to pay by credit card, please enter your billing information below:

Name on Card _____ Email (payment confirmation) _____

Billing address: _____

Card number: _____ Exp. Date _____

Students participating in Chamber Music, Symphonic Band, Concert, Carnegie Hill, Morningside or ISO at Turtle Bay orchestras **will be billed once they are assigned to an ensemble**. Tuition is due **in full** before the first rehearsal in September unless discounts are applicable (*see ISO Brochure*) or the **Request for Scholarship** below has been completed. You may also choose one of the payment installment plan options as described in your tuition bill.

The ISO Symphony is a full-scholarship ensemble supported through the annual benefit concert and the generosity of individuals, foundations and corporations. Only the **\$250** registration fee is required.

Tuition for 2009-2010 is as follows (*Tuition rates include the annual retreat fee. Please note - financial aid is available and payments may be made in installments.)

Symphonic Band...\$1045/year
Concert Orchestra...\$1045/year
Carnegie Hill Orchestra...\$970/year

Morningside/Turtle Bay Orchestras...\$920/year
Chamber Music...\$725/year

Return completed application to: ISO, 1556 Third Ave., Suite 601, New York, NY, 10128, together with the mandatory registration fee.

Request for Scholarship

Before completing this application, please carefully read the *ISO Brochure*. Scholarships are based on need. If you require financial assistance, that member of the family responsible for tuition must supply the following information. **A request for scholarship will not be considered unless accompanied by the first two pages of your most recent tax return; this information will be treated with the strictest confidentiality. Please note that this application will not be considered unless the mandatory \$150 registration fee is paid.**

Parent No. 1

Parent No. 2

Name: _____

Name: _____

Employer: _____

Employer: _____

Title: _____

Title: _____

Total Family Income: _____

No. in Family Supported by that Income: _____

Please describe any special circumstances of which you'd like us to be aware: _____

AMOUNT OF AID REQUESTED: \$ _____

Please attach a copy of the first two pages of your most recent Federal Tax Return. Because of limited available funds, aid toward tuition will in almost all cases be for less than the billed amount. The amount rewarded will increase for a student participating in more than one ensemble. While ISO believes that no interested student should be excluded from the program because of inability to pay, any portion of your child's tuition that you **can** pay will help our funds to go further.