

For office use only:

Date _____

Fee _____

QB _____

DB _____

ITASCA
ORCHESTRA | & | STRINGS
PROGRAM

PO Box 140
Grand Rapids MN 55744
218-327-5781
kathy@itascaorchestra.org
fax: 218-327-5798
www.itascaorchestra.org

Grand Rapids Student Registration Form

Student Name _____

Parent(s)/Guardian(s) _____

Mailing Address _____

Home Phone _____ Work Phone(s): Mom _____

Cell Phone _____ Dad _____

Email Address _____

Student's School _____ Grade _____ Instrument _____

Teacher (Gr 2-6) _____ Study Hall/Music Time (Gr 7-12) _____

Lessons are a full-year commitment. The amount for 27 lessons is \$496 for the first student and \$448 for each additional student. This amount may be paid in 8 monthly payments from Oct. 15 – May 15. The amount stated is owed for the year regardless of a student's level of participation. IOSP will collect a registration fee of \$25 per student at the time of enrollment. This fee is nonrefundable.

Please check one:

_____ IOSP may photograph my student(s) for use in publicity and promotion.

_____ IOSP may not photograph my student(s) for use in publicity and promotion.

I have read and understand the financial commitment, lesson policies and photo permission form.

Parent Signature _____ Date _____

Please send information about the tuition-tax credit loan program _____

We plan to rent a ___violin ___viola ___cello ___bass from IOSP.