



Santa Rosa Band Program Registration Form 2013-2014



www.pvsd.k12.ca.us

www.sokm.net

Dedicated to providing 4th- 8th grade students in Ventura County with positive, creative and educational experiences in the arts.

Santa Rosa Music Program: (805) 491-3822

Rene Godina 805-822-8507, Band Director

Student's Full Name (Printed)	Home Phone	Grade	School
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Mother's Name	Home Phone	Work/Cell Phone
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Address	City	Zip	E-mail address (Please print clearly)
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Father's Name	Home Phone	Work/Cell Phone
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Address	City	Zip	E-mail address (Please print clearly)
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Additional Information:

Are there any special conditions of which we need to be aware? Yes No
 If Yes, write explanation below and provide any necessary documentation.

Check here if you **do not** want your email used to receive information about SRTMS Band, or Save Our Kids' Music (SOKM). Please note: Newsletters and flyers are distributed via email.

Check here if you **do not** want your child's name, phone number, email and address printed in a SRTMS Band directory.

Check here if you **do not** give permission for images of your child, captured during SRTMS Band activities through video, photo and/or digital camera to be used by PVSD, SRTMS or SOKM for the purpose of promoting the Pleasant Valley Music programs.

Check here if you **do not** give permission for your child to accept refreshments provided during class. If your child has any food allergies, please inform his/her instructor.

I certify that the above information is correct.

Parent/Guardian Signature

Date



Student's Name _____

Santa Rosa Beginning Band	Day(s)	Time	Room
Beginning Band – Woodwinds (Flute, Clarinet)	Mon & Wed	7:10-8:00am	MPR
Beginning Band – Brass/Saxophone and Bell Set (Saxophone, Trumpet, Trombone, Baritone)	Tues & Thurs	7:10-8:00am	MPR
All Beginning Band Students	Friday	7:10-8:00am	MPR

Please note that classes may be cancelled due to enrollment or funding issues.

Please enroll my child in the following class(es):

*Classes start the
week of
September 30*

1. Class Title: _____ Instrument: _____

Pleasant Valley School District and Save Our Kids' Music (California Non-Profit Organization) strongly believe in providing a quality arts experience to as many students as possible, but we cannot do it alone.

To help us achieve success, we are requesting an annual donation of \$300.00 for the SRTMS Band class.

I am enclosing \$300.00 as a tax-deductible donation to help make the Santa Rosa Music Program a success.

Other Amount \$ _____

Please make checks out to Save Our Kids' Music (Tax I.D. - #77-0409136).

I understand that by signing this form, I will accept the responsibility of transportation for my child to class.

Parent/Guardian Signature _____ Date _____

.....Office Use Only.....

Date/Time received: _____ Staff accepting form: _____
(mm/dd/year) (time a.m./ p.m.)

Donation Amount: _____ Cash _____ Check number _____ Reg. Form _____ Emer. Form _____

Date Officially Enrolled: _____ Confirmation of Enrollment: _____ Wait List: _____ Inst. Req. _____