

SFEMS 2019 Workshop Enrollment Form



- Baroque Workshop, Sonoma State University (June 23–29)
- Medieval & Renaissance Workshop, St. Albert's Priory (June 30–July 6)
- Recorder Workshop, St. Albert's Priory—Session 1 (July 7–13)
- Recorder Workshop, St. Albert's Priory—Session 2 (July 14–20)
- Classical Workshop, School of the Madeleine, Berkeley (July 14–20)

Enrollee's name: _____

Major instrument, or voice range: _____

PLEASE CALCULATE TOTAL FEES:

Workshop Tuition (per week):

Baroque \$795 \$ _____

Medieval/Renaissance, Classical, Recorder \$725 \$ _____

Room & Board:

Baroque (single occupancy Room & Board) \$825 \$ _____

Med/Ren, Recorder (single occupancy Room & Board) \$720 \$ _____

Meals at St. Albert's Priory (lunch & dinner—no room) \$180 \$ _____

Lunch at St. Albert's Priory (no room) \$75 \$ _____

Earlybird discount: Subtract \$50 if enrolling by March 31 \$ - 50.00

SFEMS/ARS/EMA member discount: Subtract \$45 \$ - 45.00

TOTAL FEES \$ _____

Join SFEMS (\$45) or make a tax deductible donation \$ _____

TOTAL ENCLOSED \$ _____

FULL ROOM & BOARD PAYMENT IS REQUIRED NOW to reserve your space. This payment may be refunded until 5 weeks before the workshop. No discounts for room & board payments. Room & board are optional.

- Music Discovery Workshop & Youth Collegium (MDW/YC), School of the Madeleine (June 16–21)

I would like to enroll in (choose one):

Music Discovery Workshop Youth Collegium

I need to arrange after-camp childcare

Enrollee's name: _____

Major instrument, or voice range: _____

Child's years of experience: _____

Enrollee two: _____

Major instrument, or voice range: _____

Child's years of experience: _____

PLEASE CALCULATE TOTAL FEES:

Workshop Tuition:

Music Discovery Workshop & Youth Collegium \$525 \$ _____

Earlybird discount: Subtract \$50 if enrolling by March 31 \$ - 50.00

SFEMS/ARS/EMA member discount: Subtract \$10 \$ - 10.00

Family discount: Subtract \$50 per each additional sibling \$50 x _____ \$ _____

TOTAL FEES \$ _____

Join SFEMS (\$45) or make a tax deductible donation \$ _____

TOTAL ENCLOSED \$ _____

PAYMENT: Mastercard Visa Check (to 'SFEMS Workshops')

NAME/CARDHOLDER _____ CARD NUMBER _____ EXPIRATION DATE _____ SECURITY CODE _____

ADDRESS _____ CITY/STATE/ZIP _____

DAYTIME PHONE _____ EMAIL _____