

The 66th Summer School, 2017 Registration Form

Please complete in capital letters and return one registration form per person between May 9th and May 27th, 2017. (E-mail: teri@suzukimethod.or.jp)

(Fields marked * must be completed.)

First Name*			
Middle Name			
Family Name*			
Nationality		Age*	
Gender	<input type="checkbox"/> male	<input type="checkbox"/> female	

The Name of one person who will be the Representative for Your Family or Group*

If you are the representative of your family or group, include your contact information

Address*	
Zip Code	
Telephone No.	
Fax No.	
Email Address*	

All Applicants should select a Registration Category

Registration Category* (check one)	<input type="checkbox"/> Student	<input type="checkbox"/> Teacher Observer
	<input type="checkbox"/> Accompanying Family Member	
	<input type="checkbox"/> Accompanying Preschool Child	

If you register as "Student" or "Teacher Observer", check one below

Instrument*	<input type="checkbox"/> Violin	<input type="checkbox"/> Cello	<input type="checkbox"/> Flute	<input type="checkbox"/> Piano	<input type="checkbox"/> Viola
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Do you want to purchase an Evening Concert ticket?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you want to purchase a Summer School shuttle bus ticket?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No

What languages can you speak?	
Can you speak Japanese?	
Can you speak English?	
Is your Japanese or your English better?	

Only Students need to fill out this page;

Your Teacher's Name		
Is your teacher a Suzuki teacher?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What are your teacher's Suzuki qualifications?		

Select your morning class from the "Class List" on *Attachment 1*;

Class No.*	
Piece Name*	

Students in Class No. 20-27, or 47-52, may also join string orchestra by selecting the class and part below.

String Orchestra Class*	<input type="checkbox"/> Participate in Class A (for Class No.26-27, 51-52)			
	<input type="checkbox"/> Participate in Class B (for Class No.20-25, 47-50)			
	<input type="checkbox"/> Not participate in			
Part*	<input type="checkbox"/> 1 st Violin	<input type="checkbox"/> 2 nd Violin	<input type="checkbox"/> Viola	<input type="checkbox"/> Cello

If you are a Cello student, check your chair size

Cello Chair	<input type="checkbox"/> Red	<input type="checkbox"/> Green	<input type="checkbox"/> Blue	<input type="checkbox"/> Large
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If you are a Piano student, fill out the information below.

Do you want to perform in a Piano Concert?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Performance Piece		
Performance Time		

Do you want to participate in the Four Hand Piano Class?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Class No.		
Piece Name & Part		

(The Class No. and Piece Name & Part are listed in *Attachment 1*.)