

WISCONSIN INTERGENERATIONAL ORCHESTRA

Member Registration/Tuition Form for String Players

11811 West Bluemound Road • Wauwatosa, Wisconsin 53226
Email: <u>info@wiorchestra.org</u> • Website: <u>www.wiorchestra.org</u>
*Wind, brass and percussion players must contact <u>Anne Marie Peterson</u> prior to registration.

INDIVIDUAL MEMBER or FAMILY INFORMATION - Please print clearly

Information regarding each family member joining WIO is entered on page 2 of this form.

Member Name (as it should appea	ir in the program)	, , ,	, ,	To	day's Date:	
					uuy 0 2 u.o.	
Address:						
City: State:		State:		Zip Code:		
Preferred Phone:	Prefer	l red Email:			☐ New Member ☐ Returning Member	
Parent/Emergency Contact Info						
Parent Name: Phone:						
Emergency Contact Name: Phone:						
		Membership Fees	<u> </u>			
As a non profit organization WIO relie	s on tuition fees for a	-		ased on members	ability/willingess to pay,	
we offer 3 tuition options: Basic, S			sted senarate	dy as Patron don	ore	
Sponsors and Patrons will be reco	ognizeu in ali progr	am books with Fations being in	sieu separaie	ny as Palion don	OIS.	
Please indicate which tuition option you desire.		sire. Basic		Sponsor	Patron	
Individuals 18 and Under and 62	\$125		\$150	\$250 (incl. \$100 donation)		
All Other Individuals	\$125		\$175	\$250 (incl. \$75 donation)		
Family (3 or more family membe	\$300		\$350	\$450 (incl. \$100 donation)		
	AMOUNT EN	ITION:	\$			
I would like to make an additional donation to WIO:				\$		
Total Registration Enclosed: C						
		send to Attn: WIO String Regis mound Road, Wauwatosa, Wi				
Credit card payment available t	tra.org	\$				
*Please add	d \$4 administratio	n fee to your total tuition regis	tration.	•		
I have read the Member Agreeme of the Member Agreement for my	. •		r written) belo	ow indicates my	acceptance of all of the terms	
X(Member Signature or Parent/Guardian Signa						
For WIO use only:						
	ш.	and Nama on chack			Dv.	
Date: # and Name on check By:						

Member Information - Please print clearly Ensemble Category See description iGen Symphony Senior - 62+ Intermezzo Member Name: (as it should appear in the program) Years Student Please provide your own information first, follow with Instrument Playing Date Adult participating family members. of Birth

Indicate above which ensemble you wish to join:

WIO Intermezzo - Members should have an understanding of note reading, intonation, rhythm, dynamics and articulation. Prior orchestral experience is helpful, but not a requirement.

Rehearsals are scheduled for Tuesdays from 6:30 to 8:00 pm.

WIO iGen Symphony - Is suitable for intermediate and advanced players. Quality music from all periods will be programmed. Members of our flagship orchestra are expected to set a high standard of technical and musical artistry.

Rehearsals are scheduled for Tuesdays from 6:30 to 8:00 pm.

HOW DID YOU HEAR ABOUT US?							
referred by friend	brochure/flyer	website	concert attendance				
public school teacher	private teacher	music store/conservatory	other				

Wisconsin Intergenerational Orchestra Member Agreement

Signing the Registration Form on Page 1 indicates your acceptance of the following:

(A parent or guardian must sign for anyone under the age of 18 years old.)

I agree to follow the rules for **WIO** members in effect throughout the year, including attendance and punctuality requirements, as stated in the Members Handbook. I agree to respect placement decisions made by the Artistic Director and understand that I may not be able to participate in all of **WIO**'s repertoire because of instrumentation, scoring, or other limitations.

I understand that **WIO** is a nonprofit organization with limited resources, and as a member, I will assist **WIO** in promoting its mission and with its fundraising activities. Unless I notify **WIO** in writing, I hereby grant and assign WIO the irrevocable right to use my or my child's photograph or image (without a name) without review or remuneration, both singly and with other persons or objects for **WIO** presentations, advertising, publicity, and promotional purposes that may be displayed on television, film, video, visual, electronic or printed media.

Release and Liability and Indemnity: As consideration for my (and/or my child's) participation in activities of **WIO** which I understand may entail risks such as injury to persons or property at rehearsals, performances, WIO events and functions, and travel to and from same (collectively and without limitation "**WIO** Activities"), I hereby release and discharge WIO, and it is successors, and assigns, its trustees, officers, directors, employees, agents, and volunteer workers (collectively the "Released Parties") from any and all liability for loss, injury, or damage that I (he/she/they) may suffer directly or indirectly as a result of my (their//our) participation in **WIO** Activities.

Membership fees are due with registration, or no later than the 3rd week of the session. 50% of the membership fee will be refunded if you must withdraw on or before the 5th week of the session. No refunds will be given after the 5th week of the session.

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