

# INSTITUT SUZUKI MONTRÉAL 2008

## ENROLLMENT – TEACHER TRAINING

Please fill out a separate form for each participant.

Please check :

- Violin, U -2, July 20-24
- Violin, U -3, July 24-28
- Cello, U -2, July 20-24
- Cello, U -3, July 24-28
- Cello, U -7, July 20-25
- Piano, U -3, July 20-25
- Flute, U -4, July 20-25

Last Name _____	Given name _____
Address _____	City _____
Province/State _____	Postal/Zip Code _____
T ( ) _____	( ) _____
F ( ) _____	E-mail _____
Language(s) spoken : <input type="checkbox"/> English <input type="checkbox"/> French	

Confirmation of enrollment and other information will be sent to the e-mail address listed above. If you do not check this e-mail regularly, please specify that you would like to receive your information by Regular post.

- E-mail  Regular post

Fee and Payment terms			CAN	✓
Registration (teacher trainees, observers)			\$ 75	
	Participant ✓	Auditor ✓		
Violin U -2			\$375	
Violin U -3			\$375	
Cello U -2			\$375	
Cello U -3			\$375	
Cello U -7			\$375	
Piano U -3			\$375	
Flute U -4			\$375	
Teacher Observer (SAA and SMM members pay registration fee only)			\$125	
Late Payment fee (after June 1)			\$ 50	
<b>TOTAL</b>			<b>\$</b>	<b>CAN</b>

### Fees enclosed (please check):

- Total fees. The full amount minus registration fee of \$75 CAN is refundable if written intention of withdrawal is received before July 1, 2008.
- Partial fees of \$100 CAN deposit per participant (in addition to \$50 registration fee). Balance is due by June 1, 2008. Late payment fee of \$50 CAN.

Please send a currently dated cheque or money order (Canadian funds only) payable to :

### Institut de l'éducation du talent

371 Lamoureux, Sainte-Julie, Québec, CANADA, J3E 1H1

Individual and group photos will be taken during Institut Suzuki Montreal . These photos may be used for publicity. If for any reason you do not wish to use individual photos of your child or yourself, please advise us.

I understand and accept that the organizers of Institut Suzuki Montréal bear no liability while my child attends activities organized in the context of Institut Suzuki Montréal. I take full responsibility for my child during his or her participation in activities at the Institut.

Parent's or guardian's signature required \_\_\_\_\_ Date \_\_\_\_\_