

NORTH STARS CHAMBER ORCHESTRA

Ireland Tour

REGISTRATION FORM

Name: (last, first, middle)

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Age:.....Instrument(s).....Sex.....Birthdate.....

Address:

City.....State:Zip code:.....

cell phones:.....e-mail.....

Parent's name.....

& address (if different from above).....

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cell phones.....e-mail:.....

Personal reference: Private or school teacher's name:

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Email:.....

Phone numbers:.....

Years of experience on your instrument:.....recent solo or significant group performance

piece showing your advancement level:.....

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Other performance history and/or awards-(continue on the back)

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Payments for this tour: \$300 registration fee (non-refundable) checks made to Plumeria Breezes

Flight airfare due March, remaining payment due April 30, 2018

Total including airfare: \$2790

Send payments to: **PCMA, PO Box 1702 Mt Vernon WA 98273**

Please write **Ireland** on the outside of the envelope

Contact the Director: sharynpeterson@hotmail.com or 360-421-2527