

Registration Form

First Name: _____

Last Name: _____

Email address: _____

Mailing address: _____

Instrument: _____

Workshop Preference:

You will be invited to participate in two workshops during this time.
Please indicate your first choice as "1", your second choice as "2", etc.

1 2 3 4 Private Lesson

1 2 3 4 Chamber Music Coaching With My Pre-Formed Group

1 2 3 4 Feldenkrais Workshop

1 2 3 4 Free Period

If you are applying with a pre-formed chamber group, please list the other members here (all members must submit individual applications):

Please tell us a little bit about your playing background. Have you ever/do you currently study privately? Do you participate in any ensembles?

Are you interested in receiving a \$150 tuition discount for participating in work-study? (Early arrival and/or late departure may be required.)

Please complete this form and return it, along with a registration fee/tuition deposit check in the amount of **\$125.00** made out to **New Orchestra of Washington, Inc.** to:

New Orchestra of Washington
12320 Parklawn Drive
Rockville, MD 20852
Attn. **NOWsummer**