

Individual Registration Form

CRAIG HELLA JOHNSON

SYDNEY 2018

| LAST NAME |
|---|
| FIRST |
| NAME (as you would like on your name tag) |
| I SING WITH THE FOLLOWING CHOIR/S (IF APPLICABLE): |
| VOICE PART (eg Soprano 1) |
| ADDRESS |
| CITY/STATE/POSTCODE |
| DAYTIME PHONEHOME PHONE |
| E-MAIL |
| (the address at which you would like to receive information) |
| EMERGENCY CONTACT |
| NamePhone |
| SPECIAL REQUESTS – Not guaranteed but will be requested of suppliers where applicable 1. Dietary Restrictions: |
| 2. Special Circumstances: Do you have a medical condition which staff need to be aware of? |
| 3. Additional needs: (eg. accessibility requirements) ADDITIONAL ITEMS FEES Welcome Dinner - \$55 |

Note: if you require a music stand for your music, please organise this yourself and bring to all rehearsals. Music stands cannot be provided.

Registration Form Continued

| PAYMENT: FULL PAYMENT DUE AT TIME OF REGISTRATION |
|---|
| ☐ I am making a payment of \$350 as registration for the Craig Hella Johnson Festival. |
| ☐ Welcome dinner - \$55 |
| PAYMENT TO BE MADE TO THE ACCOUNT BELOW |
| BSB Number: 012140 |
| Account Number: 198966985 |
| acknowledge I am responsible for buying and learning the music prior to the first combined rehearsal. |
| Signature:Date |
| (ALL applicants must sign reservation application; if applicant is under 18, Parent/Guardian must sign) |

E-MAIL COMPLETED FORM TO:

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