

St. George Catholic School Instrumental Music Department
“Inspiring Enthusiasm and Excellence Through Music Education”

2017 – 2018 SGS Advanced Bands Registration Form

The *St. George Instrumental Music Department* offers instruction to students in grades 4 thru 8. **Advanced Band Classes** will be offered twice weekly after school from 2:45 p.m. to 4:00 p.m. (*Adv. I on Mon. & Wed. or Adv. II on Tues. & Thur. * Adv. Band Class Placement based on playing level*). First semester, Friday afternoons may be used for section rehearsals and individual help as needed. St. George Band Directors are Mr. John Gerbrecht and Mrs. Jan Dupre.

A successful band program depends on many people. **Students** must put forth the necessary effort by practicing at home, and attending classes with instrument and music. **Parents**, encourage your child to set goals so that she/he is prepared to take advantage of musical events offered: school concerts, high school band nights, special programs, honor bands. We commend you for making this investment in your children’s music education and future!

REGISTRATION FORMS WITH PAYMENT should be sent to school in an envelope marked “St. George Band.” **Checks should be made payable to St. George School.**

Payment is due as follows:

1. Total amount for the year sent with the Registration Form due by Sept. 1, 2017: **\$ 360.00**

OR

2. Payment Plan: Initial payment of **\$ 180.00** sent with the Registration Form due by **Sept. 1, 2017:**
Balance of **\$ 180.00** due by **January 5, 2018.**

If you have any questions, please call or email Mrs. Dupre at (225) 293-1298, jan.dupre@sgschoolbr.org.

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2017 - 2018 SGS Instrumental Music Dept - Advanced Bands Registration Form:

Student: _____ Grade: _____

Please Print: Last _____ First _____

Adv. Band I: _____ Adv. Band II: _____ Years Played: _____ Instrument: _____

PARENT INFORMATION:

Name: _____

Address: _____

Home Phone: _____ Work: _____ / _____ Cell: _____

Email Address: _____

(Please print)

Parent Signature: _____

PAYMENT INFORMATION:

1. Total Cost: \$ 360.00

2. Payment Plan: Initial Payment Due By Sept. 1: \$ 180.00 // Balance Due by Jan. 5: \$ 180.00

FOR OFFICE USE ONLY

Bank: _____ Check# _____ Amount: _____ Date: _____ Cash Payment: _____