

## Summer 2009 Music Technology Institute Registration Form

Print clearly, complete **all** information on this form and mail it with payment to the address below

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ - \_\_\_\_\_

E-mail address: \_\_\_\_\_

Home phone # (\_\_\_\_\_) \_\_\_\_\_ Work phone # (\_\_\_\_\_) \_\_\_\_\_

**Select Course (s)** (*Check box next to course name*)

	August 3 – 7 <sup>th</sup>	<b><i>Digital Audio Recording for the Music Classroom</i></b> Danvers HS - Danvers, MA * Instructor: Ron Parsons
	August 10 – 14 <sup>th</sup>	<b><i>Notation Applications for Music Educators – Finale</i></b> Reading HS - Reading, MA * Instructor: Mike Moniz
<b>Type of Credit</b> Tuition Only (\$500 per course) _____ 3 Graduate Credits (\$200 per course) _____ Total payment due: _____		COMPLETE AND SEND THIS FORM WITH PAYMENT TO: <b>SCHOOLHOUSE MUSIC SERVICES</b> <b>PO Box 525</b> <b>Greenland, NH 03840-0525</b>
<b>Method of payment</b> (full payment is required for registration) Purchase Order# _____ Check # _____ Amount enclosed _____		