

Williamsburg Youth Harp Society Application for Membership 2019 - 2020

		STU	JDENT INFORM	1ATION		
Name:						
Age:						
School and Grade:						
Home Address:						
Allergies or other h	ealth condit	ions:				
Musical Experience	:					
Level (Circle One):	Harp I	Harp II	Allegro	Canto	Arpeggiare	
		PA	RENT INFORM	ATION		
Name of Parent(s):						
Home Address if Di	fferent from	n Child's:				
Parent contact num	nbers:					
Email Address:						
Emergency Contact	: (Name and	#):				
How did you hear a	bout Williar	nsburg Youth H	larp Society? _			
parent/guardian of tha	t child to mem	bership with the S	Society. One parer	t/guardian has ri	emester tuition entitles one ghts of membership stated in t ou upon your first tuition paymo	
	(Signature)			_	(Date)	

Complete and Mail with \$50 deposit to: Williamsburg Youth Harp Society, 99 Oxford Rd. Williamsburg, VA 23185