



Community String Project Youth Summer Camp 2024 Registration Form

Child's name: _____ School: _____ Grade in Fall 2024: _____

Parent/Guardian: _____ email _____

Address: _____ City/State: _____ Zip _____

Home Telephone: _____ Cell phone: _____

Work Telephone: _____

Emergency Contact (other than parent): _____

Relationship: _____ Phone _____

Emergency/Medical Notes:

Grade in school ____ Has played instrument for: 1 year ____; 2 years ____; 3 years ____; longer (middle school) ____ I

give CSP permission to use my child's photo for publicity purposes (including social media posts). YES / NO

Parent/Guardian Signature _____ Please indicate the

person(s) you approve for pick-up. Students must be picked up on time! Late parents will be charged an additional amount.

Approved name(s) for pick-up

_____ Cell phone: _____

_____ Cell phone: _____

We will need to use a CSP instrument: violin ____ viola ____ cello ____ bass ____

_____ Lesson fee – 2 weeks / 8 days.	(\$175 - full pay tuition)
_____ Instrument maintenance fee for CSP instrument	(\$20 – full pay instrument use fee)
_____ Free/reduced lunch program lesson fee (includes instrument usage)	(\$30 – FAR fee)

TOTAL PAYMENT (checks payable to CSP): _____

Payment may be made online at: communitystringproject.org (go to payments, then registration)

Or by check to: Community String Project, PO 513, Bristol, RI 02809

Checks should be made payable to *Community String Project*.

For more information please contact Vicki Boyle at: virginiaboyle23@gmail.com