JuBELLation – A Handbell Orchestra

Participant Name	IF MINOR: Age Grade (as of Sept/2017)
Address	
Participant Email (IF MINOR Parent/Guardian Email)
IF MINOR: Parent/Guard. Name(s)	Phone No
Emergency Contact(s)	Cell Phone No.
Relationship to the Student	
Prov. Health Care #	Province
Allergies	Medication(s)
Other conditions of which we should be aware	
Number of Years Ringing Handbells	
Other Instrument/s Played	
Choir/Singing Experience ☐ Yes ☐ No	
Music Theory Level □ None □ Preliminary □ In	termediate Advanced
Where did you hear about JuBELLation Handbell Orc	hestra?
☐ Ad/Brochure/Poster ☐ ALGEHR website ☐ Teac	cher School Other
IF MINOR: Name of School Attending (as of Sept. 1, 2	2017)
Name of Handbell Teacher	

Registration Fee (includ	les notebook, pair of gloves, & 5% GST) \$2	75
Method of Payment □	Cheque or Money Order 🗆 Visa 🗀 Mas	ter Card 🔲 American Express
Please make cheque or 1	noney order payable to <u>Concordia Universi</u> t	y of Edmonton
If paying by credit card	, please fax this form to 780-491-6895	
-	ard Number	Exp
Name on Card		
Signature		
	ion to myself, I give permission for my child to child, phone number)	to be signed out by the following people
· ·	iversity of Edmonton and its partners permimy/his/her likeness (no names to be used) insual productions.	-
☐ I have read and unde	erstood this agreement and understand, appr	reciate, and accept the risks associated
University of Edmontor	cicipation in JuBELLation Handbell Orchest or on any pre-determined field trips. IF M o my child's participation in the above-noted	INOR: As the parent/guardian for the
Participant (Full Name;	If Minor, Parent/Guardian)	
Signature		Date
Send with payment to	JuBELLation Handbell Orchestra c/o Sch Concordia University of Edmonton 7128 Ada Blvd. NW, Edmonton AB T5B Phone 780-479-9304 Fax 780-491-689	4E4

Email music@concordia.ab.ca