



## Registration Form

Please print clearly!

Name of student			
Name of parents or guardians			
Phone number			
Parent or guardian contact email			
Instrument			
School			
Grade		How many times have you played with SYO in the past?	
Home address (street, City, State, Zip)			

*Email is used for rehearsal and concert announcements, weather delays, schedule updates, etc.*

Membership fee for one semester: \$125.00 ☐ Check (check no.) \_\_\_\_\_ ☐ Cash

**Checks payable to: Salisbury University**

**Memo line: SYO (Student's Name)**

*Check here if you are requesting tuition assistance:*

☐ \$0 (full assistance)

☐ \$62.50 (half assistance)

☐ Other