

2009 Missouri Youth Orchestra Chamber Music Camp
STUDENT APPLICATION

Name _____ Age _____

Street Address _____

City _____ Zip _____

Home Phone _____ Parent Cell _____

Student Cell _____

Name of Parent(s) or Guardian(s) _____

Email Address (please list all email addresses to be used – student's and parent's)

Instrument _____ Years of Study _____

Name of School _____ Year in School _____

Name of Private
Teacher _____

Teacher's
Phone/email _____

Were you in last summer's MYO chamber camp? Y | N

Are you new to MYO? Y | N If so, who referred you? _____

Enrolling for Junior MYO camp (ages 6-12) _____

Enrolling for Senior MYO camp (ages 13-19) _____

Enclosed Payment to MU School of Music (JMYO \$75, SMYO \$125) _____

Please fill in the following calendar to indicate your availability for performances throughout the week of July 13th-18th. Place an X in time slots that you are unavailable.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10	10	10	10	10	10
11	11	11	11	11	11
12	12	12	12	12	12
Camp 1-5pm	Camp 1-5pm	Camp 1-5pm	Camp 1-5pm	Camp 1-5pm	Camp 1-5pm
6	6	6	6	6	6
7	7	7	7	7	7
8	8	8	8	8	8