

♪ ♪ MUSIC MINISTRY REGISTRATION FORM ♪ ♪

Immaculate Conception Parish—Elkton/North East, Maryland

Please fill out one form for each person participating in the ministry of music at ICC.

Name of Participant: \_\_\_\_\_

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP + 4: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

Home FAX No.: \_\_\_\_\_ Work FAX No.: \_\_\_\_\_

Cell Phone No.: \_\_\_\_\_ Participant Cell No.: \_\_\_\_\_

*If a minor, providing the e-mail address and cell phone number of the participant grants permission for electronic communication from the Director of Music to this young person in regards to all group activities.*

Participant E-mail: \_\_\_\_\_

Parent/Guardian E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Grade: \_\_\_\_ School/Occupation: \_\_\_\_\_

Medical Condition: [ ] Yes [ ] No If so, what? \_\_\_\_\_

Allergies: \_\_\_\_\_ Limitations: \_\_\_\_\_

*Check the musical group in which you desire to participate:*

\_\_\_ Parish Choir (Gr. 9 – Adult) \_\_\_ Contemporary Ensemble (Gr. 9 – Adult) \_\_\_ Children’s Choir (Gr. 3 – 8)

\_\_\_ Cantor *Check* [ ] Saturday 5:00 PM (IC) [ ] Sunday 9:00 AM (SJ)

*preferred*

\_\_\_ Accompanist *masses:* [ ] Sunday 8:30 AM (IC) [ ] Sunday 10:15 AM (IC) [ ] Sunday 12 PM (IC)

*Check only applicable information below:*

Voice: [ ] Soprano 1 [ ] Soprano 2 [ ] Alto 1 [ ] Alto 2 [ ] Tenor 1 [ ] Tenor 2 [ ] Bass 1 [ ] Bass 2

Instrument(s) played: Prefer to play: [ ] Solo [ ] Ensemble

\_\_\_ Piccolo \_\_\_ Alto Sax \_\_\_ Baritone Horn \_\_\_ Piano/Keyboard

\_\_\_ Flute \_\_\_ Tenor Sax \_\_\_ Tuba \_\_\_ Acoustic Guitar

\_\_\_ Oboe \_\_\_ Baritone Sax \_\_\_ Violin \_\_\_ Electric Guitar

\_\_\_ Clarinet \_\_\_ French Horn \_\_\_ Viola \_\_\_ Bass Guitar

\_\_\_ Bass Clarinet \_\_\_ Trumpet \_\_\_ Cello \_\_\_ Percussion/Trap Set

\_\_\_ Bassoon \_\_\_ Bass Trombone \_\_\_ String Bass \_\_\_ Organ

How many years of study? \_\_\_ Taking lessons now? [ ] Yes [ ] No

Teacher’s Name: \_\_\_\_\_ School Attending: \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Relationship: \_\_\_\_\_

**I hereby give my consent** for the above named individual to participate in the above named music ministry activity during the current program year. As parent/guardian, I understand that pictures (individual and group) will be taken during some events. I give permission for my son’/daughter’s picture to be used for promotional materials in highlighting the events of this parish or events sponsored by the Diocese of Wilmington. **I affirm** that the information above is true and correct.

Signature of Parent/Guardian: \_\_\_\_\_

Relationship to Participant: \_\_\_\_\_ Date: \_\_\_\_\_