



## Registration Form Fall 2024

**Please print clearly!**

Name of student		
Names 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)		
Car Make	Car Model	
Car Color	Car Year	
License Plate State	License Plate Number	

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

Membership fee for one semester: \$100.00  Check (check number) \_\_\_\_\_  Cash

Checks payable to: **Salisbury University Foundation**

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

*Check here if you are requesting tuition assistance:*

- \$0 (full assistance)     
  \$50 (half assistance)     
  Other