

WACO SYMPHONY YOUTH ORCHESTRA

PARENT AUXILIARY AND PAYMENT FORM

PLEASE FILL OUT COMPLETELY AND RETURN WITH PAYMENT TO:

WACO SYMPHONY YOUTH ORCHESTRA
PO BOX 1201
WACO, TX. 76703

Student

Name: _____

Parent

Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Parent e-mail _____

Student t-shirt size: (circle one) Adult S M L XL XXL XXXL

Please check those activities with which you would be willing to assist:

Bake cookies/treats for receptions or weekly snacks _____ Usher at concerts _____

Assist with serving at concert receptions _____ Other, as need arises _____

AMOUNT DUE:

Tuition:	\$ 200
Parent Auxiliary:	<u>\$ 10</u>
Total:	\$ 210

PAYMENT:

_____ Check enclosed payable to *Waco Symphony Association, Inc.*

_____ Charge to: _____ Visa _____ Mastercard _____ Discover

Account # _____ Exp. Date _____

Signature: _____

THANK YOU!