

**REGISTRATION FORM  
SAINT RITA YOUTH CHOIRS  
2016-2017**

NAME OF STUDENT \_\_\_\_\_

BIRTHDAY \_\_\_\_\_ HEIGHT \_\_\_\_\_

SCHOOL ATTENDING FALL 2016 \_\_\_\_\_

GRADE \_\_\_\_\_

DOES STUDENT HAVE PREVIOUS CHOIR EXPERIENCE? \_\_\_\_\_

WHERE? \_\_\_\_\_

DOES STUDENT PLAY A MUSICAL INSTRUMENT? \_\_\_\_\_

HOW MANY YEARS? \_\_\_\_\_

PARENTS' NAMES \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

EMAIL (MOTHER) \_\_\_\_\_

EMAIL (FATHER) \_\_\_\_\_

CELL PHONE (MOTHER) \_\_\_\_\_

CELL PHONE (FATHER) \_\_\_\_\_

AFTER REHEARSAL, STUDENT WILL BE: (CHECK ONE)

\_\_\_ PICKED UP BY: (NAME) \_\_\_\_\_

(PHONE) \_\_\_\_\_

\_\_\_ DISMISSED TO ST. RITA EXTENDED DAY

PLEASE RETURN TO:  
MINDY HATZMANN, ST. RITA MUSIC DEPARTMENT  
[mhatzmann@stritaparish.net](mailto:mhatzmann@stritaparish.net)

