

CMC 2009-10 Academic Year Ensembles Application
(203) 227-0662 www.chambermusiccentral.org CMCensembles@AOL.com

Student's Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Email: _____

Mother's Name: _____

Daytime Phone: _____

Father's Name: _____

Daytime Phone: _____

Age: _____ Instrument: _____ Yrs. Studied: _____

Private Teacher: _____

Phone: _____ Email: _____

Address: _____

AUDITION & TUITION INFO:

\$25 non-refundable Application Fee due with application (this is separate from the tuition).

Semester: Fall Spring Both

Preferred audition date(s): 9/12 9/13

Tuition: \$400 per semester or \$700 for both
(May be paid in two installments)

Would you like a scholarship application?

Yes (Scholarships are based upon need.)

AVAILABILITY:

Please list three convenient blocks of rehearsal time, giving as wide a time frame as possible:

1. Day: _____ Time: _____

2. Day: _____ Time: _____

3. Day: _____ Time: _____

**Print and complete this application, enclose the \$25 application fee and mail to:
Chamber Music Central, 157 Roseville Road, Westport, CT 06880**

Chamber Music Central admits students of any race and does not discriminate on the basis of race or sex in administering its educational programs, admission policies, scholarships or other programs.