

# Registration Form

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

If you require special services due to a disability (including students with learning disabilities), please indicate: \_\_\_\_\_

Private Music Lessons must be arranged by calling the CSA Office at 860-486-1073.

Summer School of the Arts & Group Classes (refer to catalog for schedule numbers)

Note: for half-day Summer School of the Arts Programs circle am or pm

Schedule #	Title	Date		Fee
_____	_____	_____	am pm	\$ _____
_____	_____	_____	am pm	\$ _____
_____	_____	_____	am pm	\$ _____
_____	_____	_____	am pm	\$ _____

Total fees \$ \_\_\_\_\_

Scholarship Fund Contribution (Please enclose a separate check payable to UCONN Foundation) \$ \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

By completing this registration, you are agreeing to the terms of the CSA refund and withdrawal policies.

Mail completed registration form with check payable to "UConn" to: Community School of the Arts, 3 Witryol Place, Unit 5195, Storrs CT 06269-5195

**10% early bird discount for weekly Summer School of the Arts registrations received by May 1.**