

Midwest Philharmonic Orchestra

Taka Matsunaga, Music Director

Application for Membership

Applicant's Name: _____

Applicant's Instrument: _____

Parent's/Guardian's Name: _____

Mailing Address: _____

City _____, IL Zip _____

E-mail Address: _____

Home Phone: _____

Cell Phone: _____

Do you have a private teacher?: YES NO

If YES, teacher's name.: _____

How did you learn about us? _____

Do you know anyone in the MPO? _____

Do you play in a school orchestra or band, or other outside orchestra?

If you are in school, what school do you attend? _____

I hereby accept the terms and conditions to become a member of "Midwest Philharmonic Orchestra". By signing below I also agree and understand that I, as a responsible member, shall attend all rehearsals and concerts of Midwest Philharmonic Orchestra and prepare by practicing all songs I play for them.

Applicant's signature: _____, Date _____, 20

Midwest Philharmonic Orchestra at the Midwest Conservatory of Music
525 West Higgins Road, Suite 205, Hoffman Estates, IL 60169
Phone: (847) 312-3690, E-mail: info@midwestconservatory.com

Office Use Only

Level: B S M C
Accepted by _____ Date _____