

**SFA 08 Application Form**

Registrants are accepted on a first-come-first-served basis.

Application **DEADLINE June 10, 2008.**

**(Please print clearly)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ PC/Zip \_\_\_\_\_

Phone (with area code) Day \_\_\_\_\_

Evening \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Number of Years Experience \_\_\_\_\_ Age if 21 or younger \_\_\_\_\_

How did you hear about Summer Flute Academy? \_\_\_\_\_

**For those under the age of 16 we need Parent or Guardian approval.**

Parent/Guardian

\_\_\_\_\_

Signature of Parent/Guardian

\_\_\_\_\_

Please list three recently-prepared solo or study works which best represent your level of playing (this information will be used to help make chamber music placements)

- 1.
- 2.
- 3.

Please indicate which package you choose:

Select:	Package 1	\$450	_____
	Package 2	\$275	_____
	Package 3	\$400	_____
	Package 4**	\$375	_____

Plus: Non-refundable Application Fee \$35

\*\* If choosing Package 4, please give names of all ensemble members

\_\_\_\_\_  
\_\_\_\_\_

Please send application and payment to:

PAYMENT (All fees in Canadian Funds)

Workshop Package + Application fee

TOTAL: \$ \_\_\_\_\_

Cheque \_\_\_\_\_

(Payable to Victoria Conservatory of Music)

Visa \_\_\_\_\_ Mastercard \_\_\_\_\_

Card # \_\_\_\_\_

\_\_\_\_\_

Expiry Date \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Signature

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**Send PAYMENT and COMPLETED APPLICATION FORM to:**

Gloria James, Coordinator  
Summer Flute Academy 2008  
Victoria Conservatory of Music  
900 Johnson Street, Victoria BC V8V 3N4 Canada