

OBERLIN

PERCUSSION INSTITUTE 2006

email ocopi@oberlin.edu ☆ www.oberlin.edu/con/summer
Tel 440-775-8044 ☆ Fax 440-775-6840

NAME _____ BIRTH DATE _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE (DAY) _____ EVENING _____

EMAIL _____

PLEASE CHECK FEMALE MALE

MASTERCLASS PERFORMANCE PREFERENCES (Maximum of two per student)

MARIMBA TIMPANI SNARE DRUM Mallet Repertoire

PLEASE CHECK APPROPRIATE SPACES

High School Student Private Teacher Professional Musician
 College Student College Teacher

CURRENT TEACHER'S NAME AND ADDRESS _____

How did you hear about this program? _____

ACCOMMODATIONS DESIRED

ROOM AND MEALS

Single Room (\$350) Double Room/Per Person (\$325) Meals only (\$200)

APPLICATION MATERIALS CHECK-LIST

\$50 Deposit Fee (Checks only please. US funds drawn on a US Bank, or World Money Order)

Please mail the application form and materials to:

Percussion Institute
Conservatory of Music
39 West College Street
Oberlin OH 44074-1576

ALL REGISTRANTS ARE REQUIRED TO SIGN THE FOLLOWING

I release Oberlin College and its agents and employees from any and all claims, demands, and causes of action on account of any injury, illness or loss which may occur during my participation in the 2006 Percussion Institute.

Signature

Date

Parent's/Guardian's Signature