



## ***Southeastern Massachusetts Wind Symphony***

### **Registration Form**

**Please Print:**

**Date** \_\_\_\_\_

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

**Phone** (home) \_\_\_\_\_ (cell) \_\_\_\_\_

**Email** \_\_\_\_\_

**Instrument** \_\_\_\_\_

**Please Circle:**

- |    |                             |                       |
|----|-----------------------------|-----------------------|
| 1. | High School Student         | Adult                 |
| 2. | <b>Level:</b> Intermediate  | Advanced Professional |
| 3. | <b>Part Preference:</b> 1st | 2nd 3rd               |

(Attempts will be made to accommodate your preference but cannot be guaranteed)

**Fee:** \$65

**Please return this completed form and fee, by the first rehearsal, payable to SMARTS.**

**Mail to:** Southeastern Massachusetts Wind Symphony  
SMARTS Collaborative  
PO Box 356  
Attleboro, MA 02703

Should you have any questions please contact SMARTS @ 508-222-8484 or  
Earl Raney, director/conductor @ 508-339-3742