INDIVIDUAL INSTRUCTION Registration for individual instruction is made through the Dean's office. Call 585.454.4596. STUDENT/PARTICIPANT INFORMATION Are you a new student at Hochstein? \Box YES $\square NO$ Are you, or any member of your family, currently enrolled at Hochstein? \Box YES $\square NO$ Have you, or any member of your family, previously registered at Hochstein? \Box YES $\square NO$ Student/Participant name (use one form per participant): _____ Phone: _____ Email: Address: _____ City_____ State ____ Zip ____ County ____ Date of Birth: ______ Age: _____ Race: (for statistical purposes) _____ Gender _____ Employer_____ Occupation _____ Phone (work)_____ For students under the age of 18, please complete the following: School attending: _____ Grade (Sept. 2023): _____ Parent/Guardian 1: ______ Email _____ Phone (home): ______ (work): _____ (cell): _____ Employer/Occupation: _____ Parent/Guardian 2: ______ Email _____ Phone (home):______ (work):_____ (cell): _____ Employer/Occupation:_____ **REGISTRATION FOR ARTS IN ACTION SUMMER CAMPS** Half Day, \$160/Session ☐ Session I, July 10-14 ☐ Session II, July 17-21 ☐ Session III, July 24-28 Full Day, \$265/Session ☐ Session I, July 10-14 ☐ Session II, July 17-21 ☐ Session III, July 24-28 □ Extended Day AM (8-9 am, M-F) \$35 □ Extended Day PM (3:30-5:30 pm, M-Th) \$50 ☐ Arts in Action Mini Camp \$120 - July 10-13 AiA Sub Total _____ \$15 Registration Fee (max. 2 per family) _____ Total _____ REGISTRATION FOR TOPIC-SPECIFIC CAMPS, WORKSHOPS, & ENSEMBLES Camp/Ensemble Name: _____ Instrument (for instrumental camps/workshops/ensembles): Individual Lesson Teacher/Phone: List NYSSMA Solo information or title and composer of lesson books or music studied. Previous Ensemble Experience —— Camp/Workshop/Ensemble Sub Total \$15 Registration Fee (max. 2 per family) _____ Total **REGISTRATION FOR ALL OTHER COURSES** Class Name: Fee Day Time _____ Sub Total _____ \$15 Registration Fee (max. 2 per family) — Total GENERAL PAYMENT INFORMATION

______ Exp. Date ______ Security Code _____

☐ Check/Money Order\$ ______ OR ☐ VISA, MC, Discover & AmEx \$ _____

Card No. _____

Cardholder Signature _____