



AGEHR Area II Young Ringers' Conference Registration Form

YR Reg. # _____

Tuesday, June 30 – Thursday, July 2, 2009
University of Scranton, Scranton, PA



Kathleen Wissinger, Festival Conductor
Jim Rossetti, Festival Coordinator
(Email: jdrmaestro@comcast.net for more information)



Please print:

AGEHR Member #
(use 6-digit #)

Choir Name (for festival program) _____

Director's Name _____

Preferred Mailing Address _____

City _____ State _____ Zip _____

Phone: Home (____) _____ Work (____) _____

Email _____

Organization (Church/School/Other): _____ +++ _____

City _____ +++ _____ State _____ Zip _____

Phone (____) _____ FAX (____) _____

Please check all items that apply :

◆ **ALL CHOIRS WILL PLAY MASSED MUSIC.**

- We play: _____ octaves of handbells
 _____ octaves of handbells and also have handchimes
 _____ octaves of handchimes only

- In addition: My choir will play Division A: (2 – 3 octaves) – Level 1
 My choir will play Division B: (3 – 5 octaves) – Level 2

- ◆ My choir will need _____ linear feet of table space (est. 2 feet per ringer; maximum of 32 feet per choir; straight line only)
 My choir will provide its own tables.
 My choir will rent _____ **8' tables @ \$15.00 per table** (see back of form to order)

- ◆ Extra bell sets are needed for festival classes. If you can bring extra bells, foam and table covers, please check the box below. An Area II Board Member or local liaison will contact you.

- I can bring **extra** equipment: _____ octaves of bells
 _____ octaves of chimes
 _____ feet of foam and table covers

- I prefer to receive my festival packet of forms: electronically by mail

Please make a copy of this completed form for your records!



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REFUND POLICY— In the event of cancellation of your registration, AGEHR Area II, Inc. will refund all registration fees paid, except the \$35 per person deposit, if cancellation is made prior to June 1. For cancellations **after** June 1, **NO FEES WILL BE REFUNDED.**

I have read and agree to abide by the rules as stated on the Instruction sheet and I understand the above refund policy:

_____ (authorized signature)

Mail the completed registration form and check to:
Checks should be made payable to: AGEHR Area II, Inc.

Chris Lenti, AGEHR Area II Treasurer
4 Meigs St
Rochester, NY 14607

Date Postmarked
_____/_____/____
Total Due
\$ _____
Deposit Amt
\$ _____
Balance Due
\$ _____
Final Check Rec'd
_____/_____/____
Dep. ck # _____
Final ck# _____
Check from

CHOIR PROFILE

Name of Choir _____

Director's Name _____ **Phone (____)** _____

# of male chaperones/directors over the age of 21	# of male ringers under the age of 21	# of female chaperones/directors over the age of 21	# of female ringers under the age of 21

REGISTRATION PROFILE

REGISTRATION CATEGORY	INCLUDED	# TO BE REGISTERED	COST PER INDIVIDUAL (Postmarked)	TOTAL COST
(See Early-Bird! →)	Includes festival events, room & all meals from Tues. dinner-Thurs. lunch		\$175.00/person by May 1	
FULLTIME REGISTRATIONS			\$200.00/person after May 1	+
COMMUTER REGISTRATION WITH LUNCH & DINNER	Includes festival events, plus lunches & dinners, Tue. dinner-Thur. lunch. No room or breakfasts included		\$95.00/person	+
COMMUTER REGISTRATION WITH NO MEALS	Includes festival events only. No room or meals included		\$65.00/person	+
TOTAL REGISTRATION DUE				
DEPOSITS RECEIVED			\$35.00/person	-
BALANCE DUE (MUST BE POSTMARKED BY MAY 15)				
8' rental tables needed (max 4 tables)	#		\$15.00/table	+
TOTAL AMOUNT DUE				

Please make a copy of this completed form for your records!