UW Summer Organ Academy

Douglas Cleveland, Director University of Washington – School of Music Seattle, Washington June 26-29, 2016

Student Registration

| Student Name: | | |
|--|----------------|--------------------|
| First | Middle | Last |
| Male or Female (circle one) Date of Birth | | |
| Email address: | | |
| Address: | | |
| Parent Name: | | |
| First | Middle | Last |
| Please mark the preferred nu |) | - - by phone |
| UW Summer Organ Academy Fee: | \$180 | |
| Final registration deadline is Full payment is due at the tim | | |
| Please make checks payable to: | | |
| University of Washington – S Memo: Organ Fund | chool of Music | |
| Please mail this form and check to the Wyatt Smith Registrar, UW Organ Acaden 8812 Stone Ave N., Apt 303 | | ademy Registrar: |

Seattle, WA 98103