 

**Dr. Rollo Dilworth Choral Workshop**

**Registration**

**Once completed, email your scanned copy to** **silagh@bach.org** **by March 15, 2019**

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| **Name:**        |
| **Preferred Pronoun:** [ ]  she/her [ ] he/him [ ]  they/them |
| **School/Community or Faith Organization:**       |
| **Street Address:**       |
| **City:**       **State:**       **Zip:**       |
| **Preferred Email:**       |
| **Preferred Phone:**       **Is this:** [ ]  Home [ ] Office [ ] Mobile |
| **What age level do you teach? Check all that apply:** [ ]  Elementary [ ]  Middle School [ ] High School  |
| **In what setting do you teach? Check all that apply:**  [ ]  Public School [ ]  Private School [ ]  Charter School [ ]  Faith Based Setting [ ]  Other:       |
| **Please register me for the following Rollo Dilworth Choral Workshops:** [ ]  Thursday, March 28, 2019 Choral Master Class (2 hours Act 48 credit - $25) [ ]  I would like to be considered as a candidate to conduct for the conducting masterclass. [ ]  Saturday, March 30, 2019 Choral Workshop and Demonstration Choir Model (5 hours Act 48 credit - $35) [ ]  Both Thursday, March 28 & Saturday March 30 workshops (7 hours Act 48 credit - $40) |
| **I would like to purchase a box lunch for Saturday for $12 extra.** [ ]  Option 1 – Deli Beef Wrap with chips, salad, fruit, cookie and beverage [ ]  Option 2 – Turkey Wrap with chips, salad, fruit, cookie and beverage [ ]  Option 3 – Vegetable Wrap with chips, salad, fruit, cookie and beverage [ ]  No lunch |
| **Total Amount Due**: $     **Please indicate form of payment;** [ ]  Check (print this form and mail to: Silagh White, Adm., BCYC, 440 Heckewelder Pl., Bethlehem, PA. Make check payable to BCYC of the Bach Choir of Bethlehem) [ ]  Credit Card payments can be made at both workshop locations.**Thank you for your interest! Questions? Please contact:****Silagh White, Administrator, BCYC @ 610-866-4382 x116 or** **silagh@bach.org** |