

Vermont Music and Arts Center 2020 – Application Form

DR	MS	MR	MRS	Instruments(s) and Activities																		
NAME _____				<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">VIOLIN</td> <td style="width: 50%;">FLUTE</td> </tr> <tr> <td>VIOLA</td> <td>OBOE</td> </tr> <tr> <td>CELLO</td> <td>CLARINET</td> </tr> <tr> <td>BASS</td> <td>BASSOON</td> </tr> <tr> <td>KEYBOARD</td> <td>HORN</td> </tr> <tr> <td>RECORDER</td> <td>ART*</td> </tr> <tr> <td>VOICE</td> <td></td> </tr> <tr> <td>NON-PARTICIPATING GUEST</td> <td></td> </tr> <tr> <td>OTHER -- Please specify:</td> <td></td> </tr> </table>	VIOLIN	FLUTE	VIOLA	OBOE	CELLO	CLARINET	BASS	BASSOON	KEYBOARD	HORN	RECORDER	ART*	VOICE		NON-PARTICIPATING GUEST		OTHER -- Please specify:	
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NON-PARTICIPATING GUEST																						
OTHER -- Please specify:																						
ADDRESS _____																						
CITY _____ STATE _____ ZIP _____																						
PHONE (____) _____ PHONE 2 (____) _____																						
EMAIL _____																						
SHARING WITH (for double rooms): _____																						
PLANNED WEEKS OF ATTENDANCE:																						
___ July 5 – 12																						
___ July 12 – 19																						
___ July 19 – 26																						
If not attending full weeks, please specify intended arrival and departure dates: _____				<hr style="border: 1px solid black;"/> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">APPLICATION FEE</td> <td style="width: 40%;">\$50</td> </tr> <tr> <td>DONATION</td> <td>_____</td> </tr> <tr> <td>TOTAL</td> <td>_____</td> </tr> </table>	APPLICATION FEE	\$50	DONATION	_____	TOTAL	_____												
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Please let us know of any special accommodation you may require during your attendance:																						

Please complete the above, **include** a non-refundable application fee of \$50.00 per person, and **mail** to:

Vermont Music and Arts Center
60 Warren St
Plainville, MA 02762

If you have any questions, please contact our Registrar, Jeff Stewart, at vmacinfo@gmail.com, or phone (508) 695-3904.

Room rates per person (for information about financial assistance, contact Jeff Stewart as per above):

Single room	\$1250
Double room shared with another participant or guest	\$1225
Non-participating guest sharing double room	\$950

Application fees received before May 1st will be credited toward the above fees. No refund of the application fee will be made after May 1st. Special rates are available for those who prefer to live off campus. One half the full cost of registration is due on or before June 1st and is **non-refundable after June 1st** except for medical emergency, or other critical situation. The balance of payment is due on arrival.

If you are new to VMAC, or are returning after an extended absence, our Registrar will contact you after receipt of your application.

We hope to provide an enjoyable experience to all VMAC participants. In order to do that, we may need to balance the numbers of players of particular instruments for one or more weeks. Please be aware that we may reach out to you to discuss your participation in this regard. Thank you in advance for your cooperation.