

Office Use Receipt:
File #:

Office of Enrolment Management and Registrar 9125 - 50 Street, Edmonton, Alberta, Canada T6B 2H3 Phone: (780)465-3500 or (800)661-TKUC (8582) Fax: (780)465-8321 admissions@kingsu.ca or registrar@kingsu.ca http://www.kingsu.ca

APPLICATION FOR COMMUNITY CHORUS

Fees: \$89.25 per term (includes GST) Have you previously been a member of the King's Community Chorus, been employed by King's and/or applied to The King's University? ☐ Yes ☐ No				
NAME: Mr. Mrs. Miss Ms.	Other (Please specify	Dr./Rev.)	Surname or Family Name	
First Name	Middle Initial	Preference Name	Former Surname(s)/Maiden Name	
CURRENT ADDRESS: Effective Until Once this date has lapsed all correspondence will be sent to the Permanent Address below.				
Apt. #	Street		City	
Province/State	Postal/Zip Code	e Count	ry Telephone	
OTHER TELEPHONE: () E-MAIL ADDRESS:			
EMERGENCY CONTACT:				
Name	Telep	phone	Relationship	
DECLARATION OF APPLICANT				
Read this Declaration carefully before signing. This must be signed by the applicant only.				
I understand participation in the Community Chorus covers both the Fall and Winter term of the given year. I have enclosed payment for the Fall term and I will pay for the Winter term by January 15, 2017. I understand membership in the Community Chorus is contingent on payment. If I choose to discontinue in the Winter term I will inform the Office of Enrolment Management and Registrar in writing.				
Whenever possible, I agree to inform the conductor in advance of my absences during the term.				
If I am absent for more than three rehearsals within the term, I agree to consult the conductor to discuss my preparedness for the end-of-term concert.				
I agree to return all music loaned to me at the end of the term. If music is lost or badly damaged, I agree to pay a replacement fee for this music.				
Signature of Applicant		 Date		