



Sycamore Strings Academy Enrollment Form and Required Agreements

Information on this form will be used for official SSA business only.

Please complete this form, save it, and send it to SSA Artistic Director Göran Berg. Either email it as a pdf file to gberg@sycamorestringsacademy.com,

or print the form and mail it to Göran Berg at 1929 Broadmoor Street, Livermore, CA 94551.

Student Information Section

Name:

Boy Girl Date of Birth (month/day/year):

Home Phone, including area code:

Years of Instrument Study: School: Grade:

Other Music Experience (if any):

Requested Instrument / Class: Violin Viola Cello Chamber Orchestra

Parent Information Section

Legal Parent / Guardian's Name (#1):

Cell Phone #1, including area code:

Legal Parent / Guardian's Name (#2):

Cell Phone #2, including area code:

Best number to call: Home Phone Cell Phone #1 Cell Phone #2

Mailing Address:

Preferred Email Address:

Other Email Address
you'd like us to have:

Payment Information Section

Enrollment Fee: \$100 paid with first invoice; one-time-only.

Sibling Enrollment: \$50 paid with first invoice; one-time-only.

Tuition and fees are charged full session each fall semester, spring semester, or summer session; invoice sent by email or regular mail. Please, check our website ([Admissions, Policies, Tuition and Fees page](#)) for tuition changes.

First tuition will be calculated upon enrollment after agreement of lesson length and time/day.

— Medical Release and other required agreements are on pages 2 and 3 —

Medical Release Information

As the parent or legal guardian, I hereby give consent to Sycamore Strings Academy to provide all emergency dental or medical care prescribed by a duly licensed physician or dentist for my child. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my dependent. I accept the expense of any medical treatment.

Please list here any special medications or allergies your child might have:

Student & Parent Behavior Guidelines

Every parent and child enrolled at Sycamore Strings Academy is required to agree to follow our Behavior Guidelines. The behavioral expectations include the following.

Students will be expected to:

- Respect your instructor, using appropriate language and addressing him/her with regard
- Respect others, keeping hands to oneself and waiting one's turn
- Pay attention
- Keep instrument quiet while the teacher is instructing or when it is not the child's turn
- Use bathroom during break times and only for its intended use
- Respect the property of all teaching and performance facilities
- Clean up after oneself and remain in designated areas only
- Refrain from eating, drinking, or chewing gum during lessons or performances
- Keep cell phones and other electronic devices turned off during lessons or performances

Parents will be expected to:

- Support and reinforce the above expectations and cooperate with all staff members
- Be responsible for the child's behavior and all accompanying siblings
- Refrain from talking during the lesson time
- Refrain from eating or drinking during lessons or performances
- Keep cell phones and other electronic devices turned off during lessons or performances

Each student will be given two verbal warnings before being removed from a class. Repeat offenders may be asked to leave the program following their second written notice from Sycamore Strings Academy regarding a behavior infraction.

Photo Release

I hereby authorize and consent to the use of my child's visual image by Sycamore Strings Academy for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

Yes No

Policy Agreement

I have read, understood, and agree to abide by the policies detailed on all pages at the Sycamore Strings Academy website: www.sycamorestringsacademy.com.

Hold Harmless Agreement / Release of Liability Waiver

To be signed and returned before joining the Sycamore Strings Academy, or attending rehearsal with Sycamore Chamber Orchestra or Sycamore Junior Chamber Orchestra.

The undersigned parent/musician indemnifies and agrees to hold harmless Sycamore Strings Academy, called SSA, its teachers, officers, instructors, agents, owner and director, and assigns from any and all liability whatsoever, for any damage or injuries, and from any and all claims and demands, including attorney fees, arising out of the party's participation in live lessons, orchestra, classes, workshops, performances, and other related activities provided by members of SSA.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the SSA and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I understand that the risk of becoming exposed to or infected by COVID-19 at the SSA may result from the actions, omissions, or negligence of myself and others, including, but not limited to, SSA employees, volunteers, and other students and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury and disability), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the SSA. On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the SSA, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the SSA, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any SSA class.

Sign and Return

I have read, certify, and agree to the terms and conditions set forth this document in the Medical Release Information section, the Student & Parent Behavior Guidelines section, the Photo Release section (where my consent or lack of consent is indicated), the Policy Agreement section, and the Hold Harmless Agreement / Release of Liability Waiver section.

Date

Student Name – Printed

Student Signature (if student is 18 or over)

Parent/Guardian Signature (if student 17 or under)

Parent/Guardian relationship to student

Note: Please save the form and email it to SSA at gberg@sycamorestringsacademy.com, or print the form and mail it to Göran Berg, 1929 Broadmoor Street, Livermore, CA 94551.