



Summer Camp Registration Form

Please reserve a space in the CSP Summer Camp for my child. My \$180 payment is included. (\$160 if postmarked by May 15th.) Include \$15 with registration if you do not have a t-shirt from last year's camp.

Child's Name: _____

Child's Private Teacher: _____

Instrument: _____

Current Working Piece: _____

Age: _____ Number of Years Studied: _____

List Music Theory Experience: _____

Parent / Guardian's Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

(Please provide e-mail address, as camp schedule will be e-mailed prior to camp)

Mail registration form and full tuition to reserve your child's place.

*Make checks payable to: Corryville Suzuki Project
PO Box 30316
Cincinnati, OH 45230*