

# Silver Roots Residency Application Form (Due Friday, August 6, 2010)

Go to [www.silverrootsmusic.com/documents/residency%20project.pdf](http://www.silverrootsmusic.com/documents/residency%20project.pdf) for more information.

Please print form, fill out all fields, and send a scan to [info@silverrootsmusic.com](mailto:info@silverrootsmusic.com).

## General Information

Full Name

E-Mail Address

Street Address

City, State, Zip Code

Home Phone ( ) -

Cell Phone ( ) -

## Personal Information

Age

Instrument

Genre Classical  Jazz  Celtic  Bluegrass  World  Other

Years of Study

Level Beginner  Intermediate  Advanced

Can Read Music Yes  No

## Additional Contact Information

Parent - Full Name

Parent - Phone ( ) -

Emergency Contact - Full Name

Emergency Contact - Phone ( ) -

## Questions

What do you hope to learn from this workshop:

Tell us a little about yourself (lesson experience [private or group], performance experience, etc):

Please e-mail completed form to [info@silverrootsmusic.com](mailto:info@silverrootsmusic.com) and send \$25 registration fee to:

First Best Place Task Force, PO Box 2244, Columbia Falls, MT 59912

Make check payable to First Best Place Task Force. Payment due Friday, August 13, 2010.