

**Enrollment Form—Madison Early Music Workshop, July 11–18, 2009 Program #3701-10**

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_  
Area code daytime number or cell phone

*Information will be used to contact you about your registration and for future marketing*

- Check this box if you do **NOT** consent to sharing your contact information on an MEMF participant roster made available to MEMF participants and faculty.

**Enrollment Fee:**

*(Note: A non-refundable \$75 deposit will secure registration; the remainder is due on arrival.)*

- MEMF Workshop (\$480) .....\$ \_\_\_\_\_  
 College Student Workshop Enrollment (\$380) .....\$ \_\_\_\_\_  
(Please enclose proof of full-time status)  
 Bring-a-Friend Discount Fee (\$380) .....\$ \_\_\_\_\_  
(see General Information for details and restrictions)

Past participant's name \_\_\_\_\_

New participant's name \_\_\_\_\_

**Instrument Rental:** *(\$50, payable now or at final registration)*

need to rent this instrument: \_\_\_\_\_ \$ \_\_\_\_\_

**Credits or Continuing Education Units:**

- Send me information on UW-Madison credit (to be billed separately)  
 I am interested in earning 4.5 CEUs (no fee)

**TOTAL AMOUNT DUE** .....\$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** .....\$ \_\_\_\_\_

- Enclosed check/money order, payable to UW-Madison.  
 Please charge to the following account:

MasterCard  VISA  American Express

Card No. \_\_\_\_\_ Expires \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

**Mail to:** Madison Early Music Festival, UW-Madison  
21 N. Park Street, 7<sup>th</sup> Floor  
Madison, WI 53715-1218

**Or fax to:** 608-265-4555

*Phone or fax registrations must include payments by credit card or purchase order.*