



Presents....



**GRADE 7- 8 CLASSROOM WORKSHOP REGISTRATION FORM**

School Name \_\_\_\_\_ Principal \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Grade 7 - 8 Class Workshop Program - (Maximum 30 children per Workshop)**  
**Tim Moher, Saxophonist / Music Educator** Workshop Length: 50-60 Minutes  
**Workshop Fee: \$125 per workshop.**

**OPEN EARS = OPEN MIND** workshop combines hands on classroom activities with fundamental concepts of music in an exciting and dynamic way that will entertain as well as educate.

**Tim brings his own data projector and laptop, so access to power and an A/V cart will be needed, together with a projection screen, white board.**

**Planning Teacher: If you are completing this form for your teachers, please complete the form using their name and the number of students in their class.**

**Planning Teacher Name:**

Mr.  Mrs.  Ms.  \_\_\_\_\_

**Teacher's Name:** \_\_\_\_\_ **# Students** \_\_\_\_\_ **Grade** \_\_\_\_\_

Mr.  Mrs.  Ms.  \_\_\_\_\_

Mr.  Mrs.  Ms.  \_\_\_\_\_

**STUDY GUIDE CAN BE DOWNLOADED FROM OUR WEBSITE:**  
<http://gymc.ca/programs/gymc-and-resident-music-programs/do-re-mi/>

**PLEASE NOTE: EVERY EFFORT WILL BE MADE TO ACCOMMODATE YOUR SCHEDULING REQUEST BUT BE AWARE THAT OUR ARTIST HAS SOME LIMITATIONS TO HIS AVAILABILITY.**

**Preferred Time:**

**Morning  Afternoon**       **Mon  Tues  Wed  Thurs  Fri**

**CONFLICTS:**

It would be greatly appreciated if you could indicate any conflicting times and dates.

\_\_\_\_\_  
\_\_\_\_\_

By signing this registration form I consent to email communication from the GYMC which may include but is not limited to reminders, invoices, news and events, and correspondence.

**Completed Registration Form should be scanned and saved as a PDF which can be e-mailed to the following e-mail address: [schoolprograms@teksavvy.com](mailto:schoolprograms@teksavvy.com)**

**OR**  
**Fax to: 519-837-1121**