## Lumina String Quartet Chamber Music Institute for Young Musicians Student Application Form

Name:		DOB:	
First I	ast		
Address:	······································		
Street	City	State	Zip
Parent(s) Name(s):		Email address:	
Home Phone:		Business Phone:	
Desired Session: ☐ August 3 – August 9, 2020		$\Box$ Second week August 10 – 16, 2020	
Instrument:		Years Studied:	
Private Teacher:			
Your current repertoire (solo and c	uartet):		
need more space? Please use reverse side	, -		
Music groups you have played wit	h in the past 3 years:		
need more space? Please use reverse side	,		
	Fees: per week.	due by June 15, 2	020
	<b>-</b>	on (Includes 4 tickets)	<b>~_</b>
		ee (after June 15)	
		*	
	□ Donation. \$_		
	$\square$ Total: \$ _		

Please make your check payable to The Lumina String Quartet and mail with this registration form to:

The Lumina String Quartet C/o Asya Meshberg 7 Highland Ave. Darien, CT 06820

Note: Tuition is subsidized by scholarship assistance for all accepted participants. Any questions please contact Asya Meshberg at 203 -655- 8543

Visit us at: www.Chambermusicinstitute.org