

**Los Mapaches 2010-11 Season**  
**\*EARLY\* Registration Form**



Child's name \_\_\_\_\_

Child's grade & school \_\_\_\_\_

Child's address \_\_\_\_\_

**Please check which class(es) your child is signing up for:**

Wednesdays, September 15 - December 15 (Fall Session)

February 2 - May 11 (Spring Session)

- 2:30-3:20 Chitos (grades K-1)
- 3:30-4:20 Costa (grades 2)
- 4:30-5:20 Pueblo (grades 3-4)

Thursdays, September 16 - December 16 (Fall Session)

February 3 - May 26 (Spring Session)

- 4:15-5:00 Beginning Latin American guitar- open to 2<sup>nd</sup> grade and up
- 5:00-5:45 Latin American Strings ensemble - guitar and/or charango (every other week) open to 4<sup>th</sup> grade and up
- 6:00-7:30 'Paches (grades 5-8)

Class	Early registration Fees (paid by Aug 1)		Regular Fees (after Aug 1)		Amount
	Fall only	Full year	Fall only	Full year	
Pueblo, Costa, Chitos	\$335	\$650	TBA	TBA	
Beginning Latin American Guitar	\$335	\$650	TBA	TBA	
String ensemble	\$170	\$320	TBA	TBA	
'Paches	\$380	\$740	TBA	TBA	
\$20 discount per session for the second child					
Yes! I would like to add a tax deductible donation to Los Mapaches to support scholarships, visiting artists, & other special events					
Total enclosed (check payable to <i>Los Mapaches Project</i> )					
NOTE: Payment <i>must</i> be received before your child attends their first class. Payment is non refundable					

**Please check one:**

- I am enclosing payment for the fall and spring sessions.
- I am enclosing payment for the fall session only.

Name of parent/guardian \_\_\_\_\_

Phone numbers \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Name of second parent/guardian \_\_\_\_\_

Phone numbers \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

*Please check:*

As part of Los Mapaches, I understand that my child needs to attend rehearsals and performances. I also understand that in order for Los Mapaches to be a success, I will volunteer in some way over the course of the year.

I understand that Mapaches classes are held at Berkwood Hedge School and that my child must be enrolled in the Berkwood Hedge Afterschool program on the day of his/her Mapaches class to receive snack and/or play on the school grounds.

**Photo/video release:**

I, (parent's name, please print) \_\_\_\_\_, parent of

\_\_\_\_\_, give the LOS MAPACHES PROJECT, the absolute right and permission to use my child's photograph(s), video(s), and recording(s) in its promotional materials, compact disc covers and publicity efforts. I understand that the photograph(s), video(s), recording(s) may be used in a publication, print ad, direct-mail piece, electronic media (e.g. video, CD-ROM, Internet, World Wide Web), or other form of promotion. I release LOS MAPACHES PROJECT, the photographer, videographer, recording engineer and their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

**Send this form with your check to: Los Mapaches Project**  
1809 Bancroft Way  
Berkeley, CA 94703

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