

Registration Form University Orchestra Polyphonia Zürich

First / last name _____

Date of birth ____ . ____ . ____

Instrument _____

I've been playing since ____

Address _____

Telephone _____

E-Mail _____

Subject of study _____

ETH UZH _____

I have looked at the sheet music. Additionally, I need (transpositions, simplifications, etc):

I have looked at the rehearsal plan for this semester and will arrange my schedule accordingly. I will let Joel (besetzung@polyphonia.ch) know about any absences.

I hereby join the association Universitätsorchester Polyphonia Zürich.

Place, Date _____ Signature _____

The small print

At the moment the association does not levy a membership fee.

Members oblige themselves to attend all rehearsals or to inform the voice leader as soon as possible in case of inability to attend. A maximum of three absences are generally permissible per semester; the participation in the rehearsal weekend and final rehearsal are mandatory for the participation in the concert.

The departure from the association is possible at any time by written notification of the board.