

**CONTEMPORARY COMMERCIAL MUSIC VOCAL PEDAGOGY
INSTITUTE 2010**

ON CAMPUS HOUSING RESERVATION AND PAYMENT

Business Office Use Only

Date: _____ Amt Paid: \$ _____

A/R Initials: _____ Receipt #: _____

Contemporary Commercial Music: July 17-26

Name _____

ID# _____ **Select according to arrival/departure needs.**

Important Information

Reserve early to assure space availability. PLEASE KEEP A COPY FOR YOUR RECORDS.

Arrangements for off campus housing are made individually by participants directly with the facility.

On campus housing includes the evening meal on the night of the stay plus breakfast and lunch the next day. The cost per participant for housing and meals will be \$50.00 per day. Due to the popularity of this course, rooms may be double occupancy.

CONTACT:
Katie Aimone
(540) 545 7339
kaimone@su.edu

| Date | Cost | Enter charges |
|--------------------|------|---|
| Friday, July 16 | \$50 | _____ Level I students arrive late afternoon for check-in. |
| Saturday, July 17 | \$50 | _____ Level I registration at 8:30 A.M. Level I and instruction begins at 9 A.M. |
| Sunday, July 18 | \$50 | _____ Level I continues |
| Monday, July 19 | \$50 | _____ Level I continues Evening masterclass for all |
| Tuesday, July 20 | \$50 | _____ Level II and Gospel Styles registration at 8:30 A.M. Level II and Gospel Styles instruction begins at 9 A.M. |
| Wednesday, July 21 | \$50 | _____ Level II and Gospel Styles continues |
| Thursday, July 22 | \$50 | _____ Level II and Gospel Styles continues Evening student recital |
| Friday, July 23 | \$50 | _____ Level III & Injured Voices registration at 8:30 A.M. Level III & Injured Voices begins at 9 A.M. |
| Saturday, July 24 | \$50 | _____ Level III & Injured Voices continues |
| Sunday, July 25 | \$50 | _____ Level III & Injured Voices continues |

Housing Total \$ _____ (ARST)
Payment for housing is due in full at time of reservation.

I understand that I will not be officially housed with Shenandoah University until my balance for housing has been paid in full.

CCM PAYMENT SECTION-HOUSING

Participant name (print) _____ ID# _____

If address is different from the participant, please complete card holder information below:

**Make checks payable to Shenandoah University.
Method of Payment:**

- Money Order Check American Express
 Discover MasterCard VISA

_____ Card holder address

_____ City State/Province Zip

Amount to be charged \$ _____ (ARST)

_____ Country

_____ Name as it appears on credit card (print)

_____ Home phone Work Phone

_____ SS#/SU I.D.

_____ E-mail

_____ Card number Expiration

**Mail this page with payment to Shenandoah University
Business Office, 1460 University Drive, Winchester, VA 22601
Deadline for Housing Reservation/Payments: July 1, 2010**

X _____
Card holder signature required