

JE \_\_\_\_\_ SE \_\_\_\_\_ CHILD'S LAST NAME \_\_\_\_\_

**Bennington Children's Chorus**  
**P.O. Box 335 Bennington, VT 05201**  
**www.benningtonchildrenschorus.com**

**FALL TUITION FORM – October - December 2018**

Child's Name \_\_\_\_\_

Person responsible for tuition \_\_\_\_\_

Contact Info (if different from child's):

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Phone #)

\_\_\_\_\_  
(Email)

**Junior Ensemble**

\_\_\_\_\_ \$115

**Senior Ensemble**

\_\_\_\_\_ \$145

Please return registration materials and tuition by October 22.  
Make checks payable to ***Bennington Children's Chorus*** and  
bring to rehearsal or mail to: P.O. Box 335 Bennington, VT.

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A family rate is available to those families  
with more than one child in chorus.  
Monthly payment plans are available.

It is our policy that no child is denied  
an opportunity to sing because of inability to pay.  
Thanks to the generous support of  
the *Friends of the Chorus*, financial aid is available.  
For more information, please contact  
Deborah Teller 484.432.5095 or detnsc@aol.com