

FAMILY MEMBERSHIP APPLICATION 2008-2009

Parent Name (Dr. Mr. Mrs. Ms. Miss) _____
Home Address _____ City _____ State ____ Zip _____
Home phone (_____) _____ Fax (_____) _____ Cell phone (_____) _____
E-mail _____ Date: _____

Children's Information (Check Here if student is an adult _____):

Name _____ Date of Birth _____

Instrument _____ Teacher _____

Name _____ Date of Birth _____

Instrument _____ Teacher _____

Name _____ Date of Birth _____

Instrument _____ Teacher _____

(Please List Additional Children on the reverse side)

- The cost of HASSA Parent/Family Membership is \$10.00. This includes the right to participate in HASSA events and workshops, parent workshop participation and other benefits.
- The student's teacher must be an active HASSA member to be eligible for student participation in HASSA events or workshops, unless specified on the workshop application.
- Membership runs from August 1- July 31. Parents must submit a separate Family Membership Application to each HASSA teacher that their children study with, however they only need to pay their membership fee once.
- Membership in the Suzuki Association of the Americas is strongly encouraged but not required.
- Please make all HASSA membership dues payable to YOUR TEACHER. Please consult your teacher for their preferred method of payment (cash, checks, etc.) If your teacher will accept checks, you must make your check payable to YOUR TEACHER. Individual checks payable to HASSA cannot be accepted. **There will be no refunds**

Volunteer opportunities: I am interested the following: (check all that apply)

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Workshop registration | <input type="checkbox"/> Workshop set-up/clean-up | <input type="checkbox"/> Refreshments |
| <input type="checkbox"/> Typing/computer work | <input type="checkbox"/> Organizing teacher luncheons | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Website | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Other: _____ | | |

We do not wish to volunteer, but we understand the importance of volunteerism and fundraising to HASSA. We would like to help by donating to the HASSA Fund Drive**. (See below**)

Please check here if you have already submitted your dues to another HASSA member teacher _____
Name of teacher dues were submitted to _____

I have enclosed the following:

HASSA yearly dues (please make check payable to your teacher-see instructions above) \$ 10.00

Donation to the HASSA scholarship fund (please make a separate check payable to HASSA) \$ _____

**HASSA Fund Drive contribution (please make a separate check payable to HASSA) \$ _____

(HASSA is a 501(c)3 non-profit organization. All donations are tax deductible to the extent allowed by law)

Total \$ _____

The Undersigned, on behalf of himself or herself and the participant (if a minor) hereby releases and discharges HASSA and its officers, employees, agents, and assigns (referred to herein as "HASSA") of and from all claims, liabilities, and causes of action for damages and injuries including those caused by any act or failure to act, negligence, willful misconduct, breach of contract, product liability, or violation of statute arising from or relating to the undersigned and/or the participants attendance and participation in HASSA events. I agree to indemnify HASSA, and hold it harmless from all such losses, liabilities, damages, claims and actions including legal fees and costs of defense arising out of this event. The undersigned, further consents on behalf of himself or herself, and the participant (if a minor) to HASSA's use of photos, videos, or recordings of the undersigned and/or the participant from HASSA events for publicity for the organization in print or electronic media.

Signature _____