



***PLEASE COMPLETE ONE FORM FOR EACH TEACHER TO BE REGISTERED**

Last Name _____ First Name _____

Home Address _____ City _____

State ____ Zip _____ Home or cell phone (____) _____

Preferred email for correspondence _____

School _____ District _____ Phone _____

District Contact (i.e., Curriculum Coordinator) Name: _____ email _____

Purchaser Name: _____ Email: _____ Phone: _____

Purchase Order Number (if applicable): _____

*Levels of Orff completed (circle) None 1 2 3

*Are you a National AOSA member for 2017-2018 (circle) yes no

*Would you be willing to have a student teacher (circle) yes no

*Included in the directory (circle) yes opt-out

***Please check the items which pertain to you:**

<input type="checkbox"/> Music specialist	<input type="checkbox"/> Church musician	<input type="checkbox"/> College Student
<input type="checkbox"/> Classroom teacher	<input type="checkbox"/> University personnel	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Administrator	<input type="checkbox"/> Music therapist	_____
<input type="checkbox"/> PE/Movement teacher	<input type="checkbox"/> Industry	

***Please check appropriate items to be paid:**

_____ \$30 single workshop (chapter members only)

_____ \$55 St. Louis AOSA chapter membership and single workshop

_____ \$95 for St. Louis AOSA membership and pre-paid workshop series for all of this year's local workshops, **payment deadline SEPTEMBER 1ST.**



St. Louis AOSA
PO Box 643
Manchester, MO 63011

PO #
Applicant's name:
Applicant's school district:

AOSA Workshop Series 2018-2019

Professional Development for Music Educators

August 25, 2018	Roger Sams: Orff and Kodaly - Friends, Not Foes!
September 22, 2018	Tracy King: Working the Workstations
October 20, 2018	Manju Durairaj: 21st Century Orff Schulwerk-Evolution of Process
February 23, 2019	Meg Tietz: Planning Programs with Purpose
April 6, 2019	Stephanie Brueggeman & Sheila Baer: Chapter Share and potluck
Total Workshop Cost:	\$95 if paid by September 1st, after that \$55.00 for the first workshop, \$30 for all subsequent workshops.

Stephanie Gummersheimer
St. Louis Chapter Treasurer
Phone: 314-440-4156 Email: stlaosa@gmail.com

If payment cannot be made by September 1st, teachers must show proof that their registration is in the process of payment with their district. Please fill out

the form below. Teachers should bring this signed form with them to the workshop.

Applicant Name: _____

Applicant School District: _____

Date Applicant Turned in Request to District: _____

Applicant Signature: _____

District Finance Contact Person: _____

District Finance Contact Email: _____ Phone: _____

Signature of District Contact Person Signifying Payment is in process:
