2023 CVSGM ApplicationJune 17th- 24th

Name				
Last	First		Name to be ca	alled
Address Street				
City Otata ZID				
City State ZIP				
Date of Birth:	Age	Ма	le Female _	<u>—</u>
Email:		Pł	one:	
Parent Information (if un	nder 18)			
Name:			Phone:	
Parent Email: Alt. Phone:				
Emergency Contact (oth	her than parent listed	d above if unde	r 18)	
Name (relationship):			Phone:	
Student Health Info Allergies:				
Medical Conditions:				
Doctor's Name:	Doctor's Phone:			
Church Information (if a	pplicable)			
Name:				
Sponsoring your tuition?	Yes No	(Group discount? _	Yes No
Accommodations: (Sel Dorm Student (\$400 Commuter Student Early Learner's Student Night Student (\$100	0) Roommate Prefer (\$250) dent (<i>Ages 4</i> -7 \$150	ence:	•	
Private Lessons- option Voice	nal (\$75 for 3 lessons			Songwriting
commuter student, leave this	SGM will be provided lunduter students and listed lasection blank.	ch with their tuitior below. Please only	check one box. If you	u will only be eating lunch as a
	neal per day (+\$30)			
Registration f	ees due when applica	itions are submit	ted (PayPal or chec	ks accepted).

All PayPal transactions are subject to a 2% additional fee.

Submit applications online to applycvsgm@gmail.com or mail to: CVSGM, Jennifer Carter 5973 Rocky Mound Rd. Westmoreland, TN 37186