

HOUSTON AREA SUZUKI STRINGS ASSOCIATION PRESENTS
THE HASSA ALL REGION/STATE WORKSHOP 2009

VIOLIN CLINICIAN: Andrzej Grabiec
VIOLA CLINICIAN: Laurence Wheeler
CELLO CLINICIAN: Cornelia Watkins

DATE: Saturday, September 12, 2009
PLACE: Westbury Baptist Church, 10425 Hillcroft St., Houston TX 77096

COST: **\$30.00 – One class**
\$45.00 – Two classes

Discounted rates for HASSA Family Members

\$20.00 – One class \$35.00 – Two classes

(Your teacher must be an active HASSA member for you to join HASSA as a family member.

Contact your teacher or see www.hassa.org for details. Family membership dues are \$10.00 per year.)

CLASS SCHEDULE: (Please arrive at least 10 minutes early for your first class)

- 8:30 a.m. – Registration and check-in
- 9:00 a.m. - 10:30 a.m. – All-State/All-Region Etude Class
- 10:30 a.m. - 10:45 a.m. - Break
- 10:45 a.m. - 12:15 p.m. All-State Orchestral Excerpt Class

DEADLINE:

There is no application deadline, but classes will be filled on a first-come, first-serve basis. We recommend applying early to insure a place in the class. Walk-ins will be accepted if space is available. Other clinicians may be hired to teach additional classes if enrollment exceeds maximum class size.

GUIDELINES:

- Students must bring their own music, music stand and a pencil. (see www.tmea.org for music requirements)
- Students must bring their own snacks, if desired.
- Please mail your completed application and check payable to “HASSA” to:
Terri Matchett, 11819 Guadalupe River Dr.. Houston TX 77067
- After September 3rd, do not mail your application. Please register at the door. You may e-mail t1mvc@att.net to confirm openings for the classes..
- Participants will be notified only by e-mail of their acceptance in the workshop, or if any classes are already full. Please include your e-mail address on application form and PRINT CLEARLY.
- To receive the discounted rate, your teacher must be an active HASSA member and you must have paid your family membership dues. You will not be given the discounted rate if your teacher has not registered your membership and paid your family membership dues in advance of registering for this workshop.
- There will be no refunds unless the application is not accepted due to space limitations.

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HASSA ALL-STATE/ALL-REGION WORKSHOP 2009 APPLICATION

Student's Name _____ Parent's Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Teacher's Name _____

E-mail _____

Classes: (Please check all you wish to participate in) **Instrument: (check only one)**
 All-State/All-Region Etude Class violin viola cello bass
 All-State Excerpt Class

Fees: **Discounted rate for HASSA Family Members**
One class: \$30.00 One Class: \$20.00
Two classes: \$45.00 Two Classes: \$35.00

I have enclosed my check payable to “HASSA” for: \$ _____