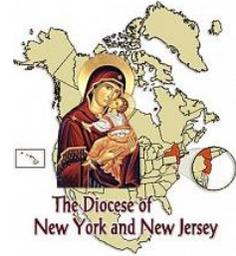


# Registration Form Liturgical Music Workshop



**Subject:** Making Music with Kids: An Orthodox Experience

**Date:** Saturday, December 1, 2012

**Place:** St. Andrew's Church, 1095 Carll's Straight Path, Dix Hills, NY 11746

**Time:** 9:00 am - 3:00 pm

**Fee:** \$20.00 (includes workshop materials and lunch)

**Instructor:** David Lucs

## Course Description:

Worship in the Orthodox Church is sung for a reason - it raises us from the everyday world of conversation and brings us into the presence of God. And when we're in God's house we offer our praise and songs together as a community before the Lord.

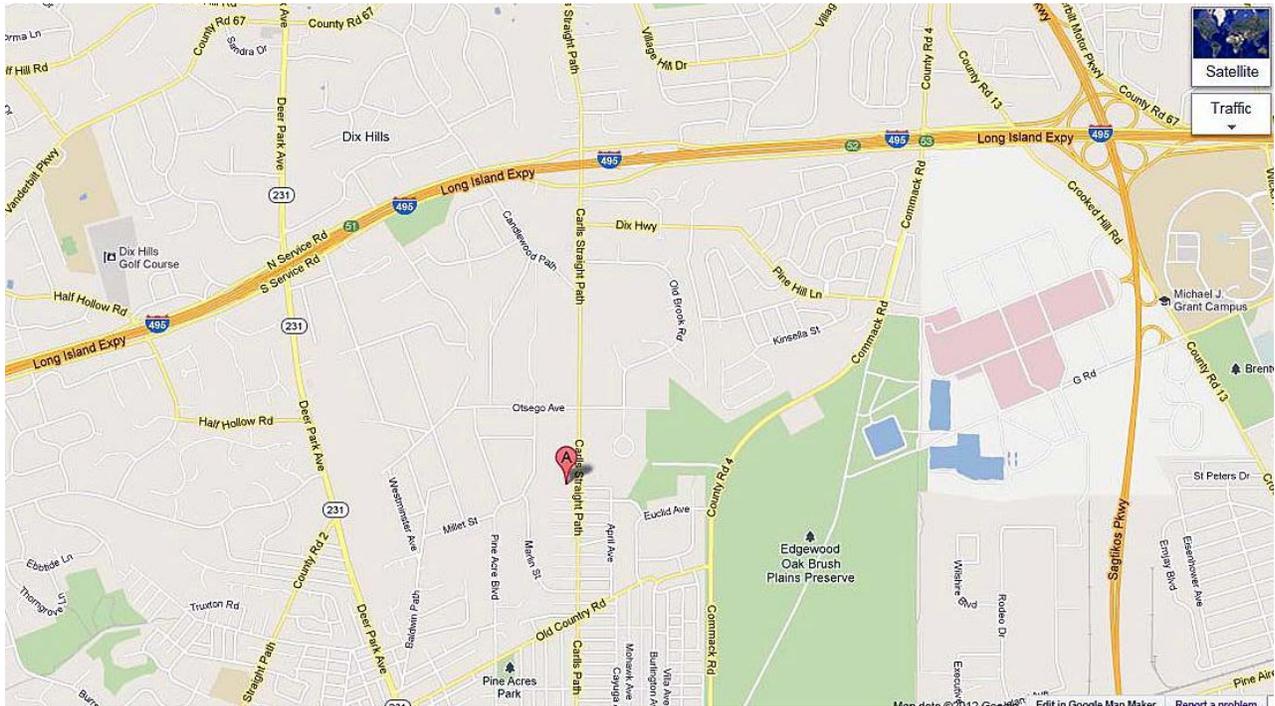
This workshop is designed to introduce children to basic music reading concepts, as well as teach them simple prayers set to music. No experience is necessary - only a desire to learn more about the services which we attend on a weekly basis. Parents are also encouraged to attend. Lunch will be provided, along with sheet music to bring home and to your home parish afterwards! All instruction will be in English.



**Pre-registration is essential.** See below for registration forms and directions to the workshop location. Make checks payable to the *Diocese of New York and New Jersey*. **Note: A completed permission form must accompany every registration.**

Child's Name:	
Home Address (including zip code)	
Preferred Phone Number:	
E-mail	
Parish Name/Address/ Jurisdiction	
<b>Send to:</b>	<b>Lucs Workshop, 38 Pearl Street, New Hyde Park, NY 11040 - (516) 437-5760</b>

## **Directions to St. Andrew's Church, Dix Hills, NY 11746**



### **From the Northern State Parkway**

Take exit 42 south to Deer Park Ave (Rt 231). Proceed south on Rt 231. Turn left onto Vanderbilt Parkway. At first right, turn right onto Carll's Straight Path. Church is on the right (approx. 2.0 miles).

### **From the Southern State Parkway**

Take exit 39 north to Deer Park Ave, (Rt 231). Travel north on Deer Park Ave for about 2.8 miles. Turn right onto Old Country Rd (one block past the Reliance Federal Savings Bank). At 4th stop sign, turn left onto Carll's Straight Path. The Church is on the left (about 0.6 of a mile).

### **From the LIE (eastbound)**

Get off at exit 51 (Deer Park Ave, Rt 231). Continue straight on the south service road (across Deer Park Ave). At first light turn right onto Carll's Straight Path. Church is on right (about 1.2 miles).

### **From the LIE (westbound)**

Get off at exit 53 (LIE divides) Continue in right lane and get off exit 52 (Commack Rd). Continue straight on north service road (across Commack Rd). At first light, turn left onto Carll's Straight Path. Church is on the right (about 1.3 miles).

**OCA Diocese of New York and New Jersey**  
**Making Music with Kids: An Orthodox Experience**  
 St. Andrew's Church, 1095 Carll's Straight Path, Dix Hills, NY 11746  
 December 1, 2012

<b>Participant information</b>	
Name: _____	Phone: _____
Address: _____	City or Town: _____
State/Province: _____	Zip/Postal Code: _____
Age and Date of Birth: _____	
<b>Primary Physician</b>	<b>Health Insurance Carrier</b>
Name: _____	Name: _____
Address: _____	Group Number: _____
City or Town: _____	Policy Number: _____
State/Province: _____	Phone: _____
Phone: _____	
<b>Allergies and pre-existing conditions:</b> _____ (use back if necessary)	
<b>Guardian Permission/Release</b>	
I am the parent or legal guardian of the participant named above. I hereby release the Orthodox Church in America, and <name of parish, diocese, or sponsoring agent>, their agents and employees from any and all liability for all personal injuries known or unknown that the youth named above may incur due to reasons unrelated by not limited to negligence by participating in activities conducted, sponsored, or associated with the even state above.	
In the event of an emergency I, or my spouse, may be reached at the following telephone numbers: 1 <sup>st</sup> #: _____ 2 <sup>nd</sup> #: _____	
Also, in the event that I cannot be reached in the case of emergency, I do hereby authorize a physician selected by the coordinator of this event to administer emergency treatment including medications, diagnostic tests, surgery, or other medical intervention deemed necessary by the physician.	
Person to release my child to at the conclusion of event: _____	
I, the undersigned, have read this release and understand all its terms. I excuse it voluntarily on behalf of myself and the participant named above and with full knowledge of the significance to bind all persons. In witness whereof, I have signed this release on the date indicated below.	
Name (please print clearly): _____	Relationship: _____
Signature: _____	Date: _____
I am the person who is authorized to pick up this participant (signature): _____	