



SUPERIOR String Alliance

Recommendation from Private Teacher OR Orchestra Teacher

Student Name: _____

What session is your student applying for? (check one)

Camp Dolce (Grades 4-6) _____

Camp Allegro (Grades 6-7) _____

Camp Presto (Grades 8-9) _____

Camp Vivace (Grades 10-12+) _____

Teacher Name: _____

Private Teacher or Orchestra Teacher? _____

Teacher Email: _____

Teacher Work Phone (ext) _____

Teacher Cell Phone _____

___ Yes, I recommend this student as a participant in the SSA Summer Music Camp.

***For advanced 6th grade students who wish to attend Camp Allegro**

___ Yes, this student has strong music-reading capabilities and would do well in Camp Allegro (Grades 6-7).

Comments:

Signature: _____

Date: _____