



Palm Beach Public Orchestral Strings Foundation, Inc.

239 Coconut Row Palm Beach, FL 33480 561-822-0728

Fax 561-822-0750

Christie Schwab
Principal

Randolph Smith
Choice Program Coordinator

Mary Schmitz
Assistant Principal

Dear PBP Strings parent,

Welcome back! I hope you had a restful and relaxing summer. As all of you know the replacement of instrument strings has in the past been the responsibility of the parents. With the goal of having a uniform sound within instrument groups and simplifying the experience for students and parents we have begun to replace all strings to the same quality and brand. The Foundation is charging a \$20 per child annual fee to help achieve this initiative. Please keep in mind that if your child's private instructor requires different strings from the ones provided by the program you will still be required to pay the String Replacement fee and you will be responsible to supply the different strings.

Also, in preparation for the coming year, if your child is in *Mozart, Beethoven, Vivaldi or Chamber*, I would ask you to obtain the following supplies for your student before the classes begin:

Violin or Viola students:

Rosin (for whichever instrument your child plays)
Shoulder rest (to match the size of the instrument)

Cello students:

Cello Rosin
Rock stop

All of these items can be purchased reasonably through several online catalogs or locally at one of the local music shops.

Shar Music Supplies
www.sharmusic.com
800-248-7427

Music Man
2309 N. Dixie Highway
West Palm Beach, FL 33407
800-785-5367

Chafins Music
608 N. Dixie Highway
Lake Worth, FL 33460
561-585-4641

Please complete the attached "String Replacement Fee" form and send it in with payment to Mr. Smith, our strings and music teacher. You may also sponsor another child, as indicated on the form.

Thank you,

Henry Paret
President
Palm Beach Public Orchestral Strings Foundation

Palm Beach Public Orchestral Strings

String Replacement Fee

Student Last Name _____ First Name _____

Orchestra _____ Homeroom Teacher _____

_____ Yes, I would like to sponsor an additional child or children.

Enclosed is (check one):

_____ \$20 for my child

_____ to pay for my child and the child/children I am sponsoring

Please make checks payable to "PBPOSF" and note "String Replacement fee" in the memo section.
Thank you for your contribution.

Payment received _____
(cash or check #/amt)

Student Last Name _____ First Name _____

Orchestra _____ Homeroom Teacher _____

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Parent Copy-for your records