

MUSIC ADVANTAGE LESSON REGISTRATION FORM

Student Name _____

Parent Name _____

Address _____

City, State, Zip _____

Phone (please list number to contact in event of cancellation) _____

Student Birthdate or School Grade _____

Email (print clearly) _____

Lesson Time OR Class Number/Day/Time _____

Preferred Lesson Time if desiring future change _____

Prior Experience _____

Where did you hear about Music Advantage? _____

I have read the Music Advantage Studio Policy.

I understand that my monthly tuition covers a specific time only and that there are NO credits or refunds for missed lessons.

I understand that my monthly tuition is due in the Music Advantage office by the 24th of each month, or a \$10 Late Fee will apply to keep my lesson time.

Signed _____