

Jennifer's Piano Studio REGISTRATION

Please complete this form and return it along with the \$25 registration fee. This fee will be credited toward the first trimester's lesson payment.

Student's name _____

Date of birth (under 18 only) _____ Grade in school (if applicable) _____

Student's cell phone (18 and over only*) _____ Texting okay*? Yes No

Student's email address (18 and over only*) _____

Previous years of study _____

Other musical instruments studied (if any) _____

Home address _____

Parent or guardian name (Primary Contact) _____

Daytime phone _____ Cell phone _____
(Please indicate preferred number to call) Texting okay? Yes No

Email address _____

Parent or guardian name (Secondary Contact) _____

Daytime phone _____ Cell phone _____
(Please indicate preferred number to call) Texting okay? Yes No

Email address _____

Are there any personal circumstances of which I should be aware (special needs, health problems, etc.)? No _____ Yes _____
(If yes, please use the back side of this sheet to explain. Your response will be kept confidential.)

I might be interested in (Check any that apply)

___ a longer lesson time (45 or 60 minutes).

___ additional performance opportunities outside of the spring recital.

___ **Please include me on your e-newsletter so I can stay updated on studio news.**

___ **Please include me on the updated 2020-2021 "Swap" List.**

(Parent/Guardian Signature for students who are under 18)

*If students are under 18 I will not contact them via phone or email unless I have a parent or guardian's permission and they are at least of high school age. By including your child's phone or email address you are giving your consent for me to communicate with your child in this way.