

| Student's Name: | Date: | |
|---|--|--|
| Birth date (optional for adult): | Grade next Fall (children only) : | |
| Address: | | |
| | | |
| Parent/Guardian: | | |
| Best Contact Name: | Number: | |
| Email: | | |
| Emergency Contact : | Number: | |
| How did you hear about <i>Melody in Me</i> ? | | |
| PosterFlyerFriends (name: |) Other | |
| Previous musical experience? | How Long? | |
| Any student information or special need you would like our teacher to have knowledge about? | | |
| | | |
| Class Choice: 1st Choice Name, Date, Time 2 nd Choice Name, Date, Time 3 rd Choice Name, Date, Time | | |
| If you don't see the day and time of class fit in your | schedule, please tell us your preferences: | |
| . , | | |
| Please read studio policy carefully before signing | | |
| Please read the registration and policy on Melody in Me webpage <u>www.melodyinme.com</u> . Class space is reserved as the registration form and the tuition/registration fee/material fee are received at the studio. All fees apply only to the course enrolled for and cannot be later transferred to other courses, other family members or subsequent sessions except the cancellation of the class. | | |
| I have read the policies and understand the tuition policies. Enclosed is the tuition plus non-refundable material fee. Please enroll the above student in the <i>Melody in Me Music Studio</i> . | | |
| | | |
| Parent's Signature | Date | |
| | | |



| Student's Name: | Date: | |
|---|---------------|--|
| Address (if changed) : | | |
| Best Contact Info (if changed): | Name: | |
| Email: | Phone Number: | |
| Emergency Contact Info (if changed): | | |
| Name: | Phone Number: | |
| Class Choice: 1st Choice Name, Date, Time 2 nd Choice Name, Date, Time 3 rd Choice Name, Date, Time Your preferences schedule | | |
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| | | |
| Signature | Date | |
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