

Stubbs' Music Center, Inc.

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www.stubbs.org

2008 – 2009 REGISTRATION FORM Summer, Fall, Spring Semesters (Circle beginning semester)

STUDENT INFORMATION: Name: _____

Age: _____ Birthdate: _____ School: _____ Grade (8/08) _____

PARENT INFORMATION:

Mother's Name: _____ Occupation: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail Address: _____

Home Phone: _____ Work Phone: _____ Cellular: _____

Father's Name: _____ Occupation: _____

Address(if different) _____ City: _____ State: _____ Zip: _____

E-mail Address: _____

Home Phone: _____ Work Phone: _____ Cellular: _____

IF BILLING ADDRESS IS DIFFERENT PLEASE LIST ON BACK OF FORM

LESSONS: List class time or request day(s) for scheduling: _____

Group _____ Private _____ INSTRUMENT or NAME OF CLASS: _____

Previous Instruction: Yes _____ No _____ If yes, what instrument and how long? _____

To secure lesson time please include the registration and materials fee with form.

******Call for specific lesson fee information******

Listed below are **registration and materials fees by semester**. The lesson fees are billed separately.

All New Students: Summer - \$65 Fall - \$65 Spring - \$65

Returning Piano Students: Summer - \$35 Fall - \$55 Spring - \$45

Returning Instrumental Students: Summer - \$35 Fall - \$45 Spring - \$35

TRANSPORTATION: (Only available during Fall and Spring Semesters.)

Billed by Semester: Gilchrist \$3.50 per week and all others \$5.00 per week.

Circle desired school and/or day.

DURING THE DAY: Maclay (Monday – Thursday) RFM (Tuesday - Thursday)

AFTER SCHOOL: MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

Gilchrist Gilchrist Gilchrist Gilchrist Gilchrist

Raa N.F.C. Kate Sullivan

CONTRACTUAL AGREEMENT: I understand that lessons are taught and billed by the semester. Lessons missed by student will be made-up ONE per semester. SMC reserves the right to change lesson and theory times within allotted time agreed for instruction without notice. I know that lesson fees are to be paid by the 10th of each month, or I will automatically be charged a \$20 late fee to my account. I know that I will automatically be charged a \$20 fee for returned checks. I know that I am responsible for any additional material fees received during each semester. **I understand that if I stop coming to lessons before the end of a semester, I am RESPONSIBLE for the balance on my account. Lessons can ONLY be terminated at the end of a semester with a THIRTY DAY WRITTEN NOTIFICATION; otherwise, students are AUTOMATICALLY ENROLLED for FOLLOWING SEMESTER.**

DATE: _____ SIGNED: _____

