

Stubbs' Music Center, Inc.

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

STUDENT INFORMATION

Student's Name _____ Birthday Month & Date _____

Address _____ City _____ State _____ Zip _____

Home Phone: _____ Work Phone _____ Cellular Phone _____

E-mail address: _____

INSTRUMENT (check all that apply)

____ Private Piano ____ Voice ____ Brass ____ Composition

____ Woodwinds ____ Guitar ____ Violin ____ Percussion

____ Piano Improv. ____ Jazz Band

LOCATION: ____ 1260 Timberlane Road ____ Robert F. Munroe Day School

CONTRACTUAL AGREEMENT: I know 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 the month, or I will automatically be charged a \$20.00 late fee to my account each month. I know that I will automatically be charged a \$20 fee for returned checks. **I understand that if I stop coming to my 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: _____

Please include the registration and materials fee to secure lesson time.

	SUMMER	FALL	SPRING
New Students:	\$65	\$65	\$65
Returning Piano Students:	\$35	\$55	\$45
Returning Instrumental Students:	\$35	\$45	\$35