New School of Music

Today's Date: _____

REGISTRATION FORM

ADULT ☐ **CHILD** ☐			**NEW STUDENT** ☐ **RETURNING STUDENT** ☐
STUDENT INFORMATION			
Student's last name:	First:	Middle:	Email: _____ If under 18, please list Parent/Guardian email.
2nd Student's last name:	First:	Middle:	
Mailing Address:			
Street:	City:	State:	ZIP Code:
Cell phone no.: ( )	Home phone no.: ( )	Work phone no.: ( )	
STUDENTS UNDER 18			
Child's Birthdate:	Age:	School:	
2nd Child's Birthdate:	Age:	School:	
Parent/Guardian 1 Last name:	First:		
Parent/Guardian 2 Last name:	First:	2nd Email: _____	
If contact information differs from Student Information above please complete the following:			
Name:	Email		
Street:	City:	State:	ZIP Code:
Cell phone no.: ( )	Home phone no.: ( )	Work phone no.: ( )	
How did you hear about the New School of Music (Please check one box):			
☐ Family/Friend ☐ Current Student ☐ Internet Search ☐ NSM Website ☐ Other, please tell us:			

CLASS INFORMATION

TERM	SUMMER '11 ☐	FALL '11 ☐		
Student 1 **Private Lessons** ☐	Instrument /Voice	Instructor		
	30 min ☐ 45 min ☐ 1 hr ☐	# lessons	Day	Time
Classes/Groups ☐	Class	Day	Time	
Student 2 **Private Lessons** ☐	Instrument /Voice	Instructor		
	30 min ☐ 45 min ☐ 1 hr ☐	# lessons	Day	Time
Classes/Groups ☐	Class	Day	Time	

PHOTO AND VIDEO RELEASE

☐ **YES**, I allow New School of Music full use of photographs or video taken at all school and/or school sponsored functions of the above registered student. I have read and understand New School of Music policies as outlined on the website.

☐ **NO photos or videos**

Student /Guardian signature _____ *Date:* _____

PAYMENT INFORMATION (registration is considered complete only after payment is received)

Tuition

Student 1 $ _____

Student 2 $ _____

Registration Fee; per term
$15 per student _____ $ _____

Optional donation to the scholarship fund $ _____

TOTAL $ _____

CHECK ☐ *#* _____

CREDIT CARD : AMEX ☐ MC ☐ VISA ☐ DISCOVER ☐

Last 4 # *Expiration Date:*

Notes: