

CARONDELET MUSIC CENTER

Registration Form for Private and Group Lessons

A fee of **\$10.00** (non-refundable processing fee) must accompany this registration form. Students continuing from Fall to Spring will **not** be required to pay an additional fee but must fill out a new form, so that information will be kept updated.

Adult _____

Child (under 18) _____

Returning Student (Yes/No) _____ If yes, teacher _____

Student's Name _____

Address _____

(street)

(city)

(state)

(ZIP)

Telephone (home) _____ (work) _____ (cell) _____

E-mail address: _____

Date of Birth _____

Name and Address of Parent/Guardian (if student is under 18)

Previous Music Education (instrument and length of study)

Instrument to be studied at Carondelet Music Center:

Guitar _____ Piano _____ Recorder _____ Voice _____

Brass: French horn _____ Trombone _____ Trumpet _____

Percussion: Drums _____ Barred instrument (specify) _____

Strings: Cello _____ Viola _____ Violin _____

Woodwinds: Clarinet _____ Flute _____ Oboe _____ Saxophone _____

Length of lesson desired: Half-hour _____ 45 Minutes _____ One hour _____

I wish to enroll in a **Group Class:** Name of class _____

Day _____ Time _____

OVER please

Please check **all** possible options below.

The most **convenient times** for scheduling a lesson are:

morning early afternoon (12-3:00 P.M.) late afternoon (3-6:00 P.M.)

early evening (6-8:30 P.M.) any time is fine; my schedule is flexible.

The **best days** for scheduling a lesson are:

Monday Tuesday Wednesday Thursday

You should be aware of three important policies of **Carondelet Music Center**.

1. Tuition: When registering for a class or private lessons, it is our expectation that you are registered for the **entire semester** and make a commitment of time for that period. The teacher in turn reserves your spot for the whole semester because of your commitment. You are, therefore, responsible for the tuition **for the entire semester**. There are **no refunds** once the semester has begun. Payment in full is preferred at the time of the first lesson. If this is not possible, three equal payments may be made at the **first lesson** of the **first three months** of each semester.

2. Make-up Lessons: Teachers will be happy to make-up lessons missed due to
a.) the teacher canceling or
b.) the Center closing due to inclement weather. (Only **one** make-up lesson per semester will be guaranteed during the make-up week.)

Please note that we cannot accommodate each student's school and/or social calendar.

3. Returned checks: A fee of \$25.00 will be charged for all returned checks.

Thank you in advance for your cooperation.

Signature (required) _____ **Date** _____