

**TOUCH OF MUSIC AT ST. MARY
EDUCATION CENTER
REGISTRATION FORM**

Student's Full Name: _____
D.O.B. _____ Grade _____
Instrument _____ Length of Study _____

Lesson pricing is based on a 23 week schedule (Nov. 6, 2013 through May 7, 2014).

**1 make up week is provided if needed on 5/14/2014.

Lesson Type: Individual lessons for piano only. Full payment \$460.

Group lessons (2-6 students): full payment \$368.

Mother's Name _____
Father's Name _____
Home Address _____
Home Phone _____ Email Address _____

I understand that my child will be excused from regular academic classes to attend weekly instrumental music lessons. I have received and read the attached information. I understand that this is a commitment for the full 2013-2014 school year.

Signature of parent/guardian responsible: _____

Registration: \$25 (\$10 for second student in family) \$ _____

Lesson fee: (full payment) \$ _____

Total enclosed: \$ _____

I prefer to pay by credit card. Please charge the amount of _____ to my Visa/MC

Credit Card #: _____ Expiration Date _____

3 digit code (back of card) _____ Signature _____

Complete billing address of card: _____

REGISTRATION AND FEE ARE DUE BY November 5, 2013.

Please mail this completed form with the appropriate fees to:

Touch of Music,

1494 N .Charlotte St. Pottstown, PA 19464.

Phone: 610-326-0630 *Please call with any questions*

Fax: 610-326-7530

Date rec'd: _____ Total rec'd: _____

Cash _____ Check _____ Credit Card _____

Credit card payments can be made by a scheduled appointment at our studio as well.