

CHRISTINE FAHEY PIANO STUDIO
2017-2018 REGISTRATION FORM

STUDENT AND PARENT INFORMATION:

Student Name (First and Last): _____

Age/Grade Entering in the Fall: _____

Parent Name (First and Last): _____

Address: _____

City, State: _____

Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Communication preference: phone or email? _____

If phone preferred, which number and best time to call? _____

LESSON ENROLLMENT INFORMATION:

Lesson Length (please check one):

30 Minutes _____

45 Minutes _____

2017-2018 ENROLLMENT AGREEMENT:

I have read, understand, and agree to the terms of the 2017-2018 Studio Policy for Christine Fahey Piano Studio.

Signature (of Parent, if student under 18 years of age)

Date