



Private Lesson Registration Form

Student Name: * _____ Age * _____ Grade * _____

Contact Phone: * _____ Email: * _____

Address: _____

City _____ Zip Code _____

Parent/Guardian 1 Name* _____ Relation: * _____

Phone: * _____ Email: * _____
(If different from above)

Parent/Guardian 2 Name _____ Relation: _____

Phone: _____ Email: _____

Primary Instrument: * _____

Level of this Instrument Education: * No experience

Beginner (0- 2 years)

Intermediate (2-5 year)

Advanced (5 + years)

- Program Interested:** Little Star Program (weekly 30-minute private lesson)
- Uphill Program (weekly 45-minute private lesson)
- Virtuoso Program (weekly 60-minute private lesson)
- Adult Program

Lesson Dates/ Times Preferred:

- | | |
|-------------------------------|---------------------------------|
| <input type="radio"/> Weekday | <input type="radio"/> Morning |
| <input type="radio"/> Weekend | <input type="radio"/> Afternoon |
| | <input type="radio"/> Evening |

Photo/Video Image Release*

I authorize Musication LLC, to photograph and record video images and audio of my child while participating in Musication program. I understand these images and recordings may be used by Musication LLC., for purposes of marketing and / or promoting the interests of Music education. I hereby waive any kind and all rights I, or my child, may have for remuneration of any kind which could accrue for the use of such photos.

- YES
- I do NOT accept the terms and conditions for photo/video image release.

Comments & Questions
