



# STUDENT REGISTRATION

## STUDENT INFORMATION

Student #1 Name \_\_\_\_\_ Birthday (M/D/Y) \_\_\_\_\_

Student's Age \_\_\_\_\_ School \_\_\_\_\_ Desired Instrument \_\_\_\_\_

Student #2 Name \_\_\_\_\_ Birthday (M/D/Y) \_\_\_\_\_

Student's Age \_\_\_\_\_ School \_\_\_\_\_ Desired Instrument \_\_\_\_\_

Student #3 Name \_\_\_\_\_ Birthday (M/D/Y) \_\_\_\_\_

Student's Age \_\_\_\_\_ School \_\_\_\_\_ Desired Instrument \_\_\_\_\_

## CONTACT INFORMATION

Parent's Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone#2 \_\_\_\_\_ Receive texts? (Y/N) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Best way to contact? \_\_\_\_\_

Email \_\_\_\_\_

Where did you hear about FAM? Newspaper, website, friend, church member, other \_\_\_\_\_

## ABSENCE POLICY

For private lesson, students are allowed one absence per semester that will be made up during the make-up week. Additional absences beyond this one allowance will be forfeited by the student. All teacher cancellations will be made up. Please provide 24 hour advance notice for an absence whenever possible. Thank you. Initial \_\_\_\_\_

## PAYMENT POLICY

I understand that the registration form and payment must be received before lessons can commence; that registration is for an entire semester and that I am obligated to complete payment for this entire period regardless of payment plan selected. Initial \_\_\_\_\_

## PHOTO POLICY

I give permission for FIRST ACADEMY of MUSIC to take and use photographs of my child(ren) for the purposes of promoting the school and its programs. I understand that photographs taken by the school may be stored and used for promotional purposes from time to time. No photo will be sold to third parties. No child's name will be identified in any publication.

\_\_\_\_ Yes, I give my permission

\_\_\_\_ No, I do not give permission

Parent (Guardian) Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

