

Klaudia's Music Studio

Oakville's Premier School of Music



REGISTRATION FORM 2013 - 2014

Thank you for choosing Klaudia's Music Studio!

How did you hear about us?	
FIRST and LAST Name of Student:	
Date of Birth:	
Sex: M / F	
Names of Parents/Guardians:	
Home phone:	
Cell Phone:	
Mom/Guardian Cell:	
Dad/Guardian Cell:	
Main Email Address: (to which you will receive all email correspondence and will be able to access online to view billing and classes through our website)	
Additional Email Address:	
Home address:	
Postal Code:	
Medical conditions:	
Emergency Contact Name:	
Emergency Contact Phone:	
Permission to take pictures/video:	

LESSONS

Instrument and Teacher:	
Second choice of instrument:	
Time of lessons requested:	
Second choice of lesson time:	
Rental of instruments:	
Notes:	

Thank you for completing this form! You will receive a confirmation email from our database.

For Office Purposes ONLY

Lessons START DATE:	
Missing weeks:	
Billing starts:	
Registration fee applies:	
Visa/MC on file YES/NO	
Method of payment:	
Interval: monthly/e.2 months	