

Piano Lesson Registration Form

Student's Name:

Student's Date of Birth: / /

Parents'/Caregivers' Names:

Email Address:

Home Phone:

Cell Phone:

Address:

Any medical conditions I should be aware of:

Student's previous/current musical education:

Why are you putting your child into lessons, and what would you like your child to get out of lessons?

Type of piano/keyboard in your home:

Parents'/Caregivers' musical experience:

Any other information which may be useful:

Do you give permission for photos/videos taken during lessons to be used for promotional or advertising purposes? Yes: No:

Please put an X through any time of day that **does not** work for lessons in 2019:

| | | | | | | |
|-----------|-----|-----|-----|-----|-----|-----|
| Monday | 1pm | 2pm | 3pm | 4pm | 5pm | 6pm |
| Tuesday | 1pm | 2pm | 3pm | 4pm | 5pm | 6pm |
| Wednesday | 1pm | 2pm | 3pm | 4pm | 5pm | 6pm |
| Thursday | 1pm | 2pm | 3pm | 4pm | 5pm | 6pm |
| Friday | 1pm | 2pm | 3pm | 4pm | 5pm | 6pm |

What is the earliest time after school each day that you could make it to a lesson?

What are your top 3 preferred lesson times during the week?

I have read and agree to the Studio Policies:

_____ *Parent Signature*



Kimberly's Piano Room