

Youth

Registration 2018-19

How did you hear about The Lark's Nest Music Studio?

Name of Student:

Day/Time of Lesson:

Instrument: (underline) Piano, Organ, Voice, Recorder, Other - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Age/Birth-date:

Grade in School/Name of School:

Experience with Music Lessons:

Dietary Restrictions/Allergies:

Parent(s) Name:

Home Address:

Contact Number:

Email Address:

Is there a piano/keyboard/instrument of choice in your home? If so, describe:

I give permission for my/my child's picture to be on: (underline) Studio Website, Facebook, Youtube

\_\_\_\_ (check please) I have read The Music Studio Policies and submitted the Enrollment Agreement.

Thank you for joining the music-making family at The Lark’s Nest Music Studio!

With gratitude, Carol

VisitTheLarksNest.com (206) 552 0876 visitthelarksnest@gmail.com com