

STUDENT INFORMATION *One form for each student*

Student: _____ M F Date of Birth: _____ School: _____

Parent/Adult 1 Mr. Mrs. Ms. Dr.: _____ Profession: _____

Parent/Adult 2 Mr. Mrs. Ms. Dr.: _____ Profession: _____

Address: _____ City: _____ Zip: _____

Preferred Phone #1: _____ Owner: _____ Home Work Cell

Preferred Phone #2: _____ Owner: _____ Home Work Cell

Preferred Phone #3: _____ Owner: _____ Home Work Cell

Preferred Email: _____ Student Email (age 13+): _____

The following information is requested by state and federal funding sources (check appropriate box):

Black / African American Asian Hispanic American Indian White/Caucasian Other:

PROGRAM INFORMATION

Fill out this section as completely as possible. Include all programs you are registering for, and all applicable discounts below. Please refer to our 2016-2017 Tuition Schedule sheet or Tuition webpage for accurate rates and discounts. If you are opting to enroll in a payment plan, please include the \$25 payment plan fee (per semester) below, and information about the remaining balance and payments will be sent to you.

Programs	Instrument	Teacher Name	Lesson Length	Preferred Days and Times	Semester Tuition
Private Lesson 1 st Instrument			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		
Private Lesson 2 nd Instrument			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		
Suzuki Private Lesson			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		
Program Name		Day/Time		Semester Tuition *	
Orchestra*					
Theory					
Ensemble					
Other Group/Class					
Annual Registration Fee (\$40 per student)					
(If applicable) Payment Plan Fee (\$25 per family, per semester)					
(If applicable) Materials Fee					
(If applicable) Discount					
TOTAL					

PAYMENT INFORMATION *Appropriate payment must accompany this registration from in order to be processed.*

I am applying for Financial Aid. I have attached my Financial Aid Application and the \$40 annual registration fee

Please enroll me in a Monthly Payment Plan. If a check payment is not received by the 1st business day of the month, the credit card on file will be automatically charged. A \$25 payment plan processing fee per semester applies.

<input type="checkbox"/> Check #: _____ (make payable to Powers Music School) Amount \$: _____ Please charge my: <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> AMEX Card #: _____ Exp. Date: _____ CID #: _____ <i>By providing a credit card, you are authorizing Powers Music School to charge any current balance at time due.</i>	Office Use Only	
	Date: _____	Amount: _____
	Initials: _____	App. Code: _____

My signature indicates that I have read and understand Powers Music School policies and accept responsibility for all charges and fees that may be incurred. I allow full use of photographs and videos taken of the above registered student at all Powers Music School sponsored events.

SIGNATURE REQUIRED (must be 18 years or older): _____ Date: _____

Form continues on other side >>>

ADDITIONAL INFORMATION

1. We are working to reduce our printing costs and be environmentally friendly – please let us know below if you prefer Powers brochures throughout the year to be emailed or hard copies mailed to you throughout the year.

- I prefer brochures and program information from Powers Music School to be emailed to me.
- I prefer brochures and program information from Powers Music School to be mailed to my home.

2. How did you first hear about Powers Music School?

- I am a current/former student.
- Heard about Powers from a friend.
- Heard about Powers from a student, faculty member, or board member of Powers.
- Heard about Powers from a private lesson teacher.
- Heard about Powers from a school music department teacher or band leader.
- Saw a flyer in the community
- Saw a brochure in the community
- Saw a sign on the street
- Received a postcard or brochure in the mail
- Newspaper
- Magazine
- Google / Internet search
- Facebook
- Youtube
- Twitter
- Powers email newsletter
- Online calendar listing

3. PARENTS: Are you interested in helping Powers Music School in a volunteer or advisory position?

- Yes, I am interested in volunteering at Powers on special projects or events.
(If yes, please tell us about your interests and skills here)

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- Yes, I have knowledge or skills I think would benefit Powers, and am interested in an Advisory Board position.
(If yes, please tell us about your interests and skills here)

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- Yes, I have knowledge or skills I think would benefit Powers, and am interested in a Board Member position.
(If yes, please tell us about your interests and skills here)
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Powers Music School does not discriminate on the basis of age, race, color, nationality, ethnic origin, religious belief, gender, or sexual orientation in its employment practices or in the administration of its educational policies.