

WEST UNIVERSTIY UNITED METHODIST CHURCH
SCHOOL OF FINE ARTS
Student Registration Form
2008-2009

Guitar Piano Violin Voice
(circle one or more)

Name of Student

Registration Date (today)

Birthday (if child)

Grade and Age (if child)

Mother's Name (if child)

Address

Father's Name (if child)

Zip Code

Home Phone

Email (required)

Address, if more than one

Zip Code

Mother's Work Place

Business Phone

Father's Work Place

Business Phone

Church Affiliation

Other Phone (cell, pager)

Emergency Contact if Parents not Available (for children and youth students)

Current Student of _____
(current teacher's name)

New student: Has the student taken lessons before? Yes No

(Please complete other side)

Please complete both sides of this form.

Teacher assignments and lesson times will be determined on a first come, first serve basis of those turning in registration forms and fees. In the event that we can honor your preferred time, please list your lesson time preferences, with #1 being your first choice.

1) _____ Day/Time

2) _____ Day/Time

3) _____ Day/Time

Additional notes regarding scheduling that you would like to be taken into consideration:

New and Returning Students: Please attach a check (Annual Registration Fee) in the amount of \$25.00 per family, payable to West University Methodist Church c/o Fine Arts.

Registration is not complete without a signed Safe Sanctuary Form for children under age 18.

I acknowledge that I have read the School of Fine Arts policies contained in the brochure and agree to abide by them should I or my child be accepted into the school.

Signature of Parent/Adult Student Date