

Roxbury Community School
Applied Private Music Lesson Program
Registration Form – Instrumental Lessons 2011-2012

* Once you have completed scheduling with your individual instructor, please fill out this form and return to Mr. Nichols at the High School

Student Name: _____ Grade: _____
Last First

Parent / Guardian Name: _____

Address: _____
Number Street Apartment #

_____ Home Phone: _____
City State Zip

Parent/Guardian Work #: _____ Cell #: _____

Parent/Guardian E-mail Address: _____

Instrument: _____ Length of Lesson: _____

Teacher Choice: _____ Cost per lesson: _____

Scheduled Day at RHS: _____ Scheduled Time: _____

Date Lessons are scheduled to Begin: _____

I give permission for my son/daughter, _____,
to participate in the Roxbury Community School Applied Music Lesson Program.

_____ Parent/Guardian Signature _____ Date

Please attach a check or fill out the credit card information for the yearly processing fee. *You will be e-mailed a coupon booklet from the Roxbury Community School for monthly lesson payments. Lesson rates vary by instructor.*

Please enclose the Annual Processing Fee.....\$20.00

- _____ Attached please find my check for \$20.00 payable to the Roxbury Community School.
- _____ Please bill my Visa/MasterCard in the amount of \$20.00

_____ Credit Card Number _____ Exp. Date _____ Cardholder's Signature

_____ I wish to have the above credit card charged for applied music instruction on a monthly basis. Please sign
to authorize the Community School to process these charges. _____
Signature Authorizing Monthly Charges

For Office Use: Day of Week: _____ Instructor: _____ Date
Lessons are Scheduled to Begin: _____ Time: _____