



Private/Semi-Private Lesson Registration Form

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Personal Information:

Student's Name: _____

Birth Date (if child): _____ Age (if child): _____

Parent's Name: _____

Address: _____

City, State, Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address: _____

How did you find out about us? _____

Registering For: _____ Piano _____ Voice _____ Violin _____ Guitar _____ Drums

Scheduled time: _____ **Start Date:** _____

Payment Information: Please Choose one:

Option 1. Automatic Payment from a credit or debit card or checking account: This option will waive the \$20 yearly registration fee

_____ Automatic payments from a Credit/Debit Card **

_____ Visa _____ Mastercard _____ American Express

_____ credit _____ debit

Credit/Debit Number _____ CVC # _____ (3 or 4 digit code from back of card)

Expiration Date: _____ Monthly Amount: _____

_____ Automatic Debit from a checking account - attach voided check to registration form

I authorize Musical Beginnings to charge my credit, debit or checking account as stated above in the amount of: _____ each month. **I understand any new book fees** will be charged automatically to my account after I am notified that a new book is needed. Preferred Payment Date: 2nd _____ 7th _____

Parent or Adult Student Signature _____

Option 2 _____ First and Lasts month tuition. This option requires a \$20 yearly registration fee.

I agree to pay _____ at the first lesson of each month. I understand that if payment is not received by the 7th of the month there will be a \$5 late fee for every week my payment is late.

Parent or adult signature: _____

Option 3. _____ Pay in full for one year A 5% discount will apply.