

Registration

Student's Name _____ Birthdate: _____

Sex : M F Youth Shirt Size: S M L XL Adult Shirt Size: S M L XL XXL

Address : _____

City: _____ State: _____ ZIP: _____

Subdivision: _____ Church Affiliation: _____

Father's Name: _____ Mother's Name: _____

Father's Mobile Phone: _____ Mother's Mobile Phone: _____

Student's Mobile Phone: _____ Home Phone: _____

Home e-mail: _____ Student e-mail: _____

How did you hear about The Contemporary School of Fine Arts ?

- Website School Flyer Referral Lamb School
 The MET Friend School Teacher Other (Please list) _____

I understand the following are non-refundable: ✓ \$50 Registration Fee (includes T-Shirt) ✓ Materials Fees

I understand a 30-day written notice is required for permanent withdrawal from the program.

Signature and withdrawal date required at the bottom of this form.

Parent Signature: _____ Date: _____

Placement *(for office use only)*

Lesson day and time will be confirmed upon receipt of payment and the completed Registration Form. Please remit payment for first month's tuition plus Registration Fee.

Lesson Day: _____ Instructor: _____

Lesson Time: _____ Instrument: _____

Registration Fee: _____

(Date Paid)

(Check #)

(Amount)

First Month Tuition: _____

(Date Paid)

(Check #)

(Amount)

Withdrawal Notice

I am removing my student from enrollment in the Contemporary School of Fine Arts.

Today's Date: _____ Last day of lessons: _____

Parent Signature: _____