



Student's Name: _____ **Date of Birth:** _____ **School:** _____

For students under 18: **Parent/Guardian Name :** _____

If student is under 18, please use contact information of the parent/guardian for the information below.

Mailing Address: _____ **City:** _____
State: _____ **Zip:** _____

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

Email: _____

You are registering for:

Private Lessons:

Month _____

Year _____

Teacher Name:

Instrument/Voice:

Length of Lesson: 30 60 minutes

Number of lessons: _____ Day & Time of Lesson: _____

Group or Ensemble:

Month _____

Year _____

Class Name:

Class Day & Time:

How did you hear about us? From a current student/friend Flyer Social Media Other
 Please check here that you have reviewed the policies and procedures of NATALIE'S SOPA.

Payment:

\$ _____ Total Tuition

\$ _____ Registration Fee: \$15/private students, \$10/group classes; \$20 for families

\$ _____ **Total Enclosed**

PERFERRED PAYMENT METHOD:

CHECK

CASH

VENMO/CASH APP

All checks must be made out to NATALIE'S SOPA

SIGNATURE: _____ **DATE:** _____ **RELATIONSHIP:** _____