

Music Registration

To register for any Music program, please complete the form at right and return to:

The Music Academy
3091 Enterprise Drive D
State College, PA 16801

The best thing about studying at The Music Academy is Mr. Goldstein's instruction...he takes time, has patience and really works at my level of ability to help me improve my skills and self-confidence.

— Theresa V.

The Music Academy

3091 Enterprise Drive D • State College, PA 16801
814 238-3451 • info@scmusicacademy.org

Music Registration Form

School Year 2010–2011

Please complete this form and return.

Date

CONTACT INFORMATION

Student name	Age (N/A for adults)
Local Address	<input type="checkbox"/> Male <input type="checkbox"/> Female
City/State/ZIP	
Home phone	Cell phone

RESPONSIBLE FOR BILLING (Non-applicable for Adult Students)

Mother's name	Father's name
Address same as above? <input type="checkbox"/> Yes <input type="checkbox"/> No*	
* If no, provide alternative address:	
City/State/ZIP	
Mother's place of work	Mother's work phone
Father's place of work	Father's work phone
Email address	

EMERGENCY INFORMATION (Non-applicable for Adult Students)

Emergency contact person	
Phone	Relationship to student

MUSICAL STUDY

Indicate Instrument you wish to study in PRIVATE LESSONS:	
Will your lessons be: <input type="checkbox"/> 30 minutes <input type="checkbox"/> 45 minutes <input type="checkbox"/> 60 minutes	
If you are enrolling in group lessons, list name and time:	
Are you a: <input type="checkbox"/> New student <input type="checkbox"/> Returning student	Number of years of previous instruction:
Name of previous teacher(s):	

How did you learn about The Music Academy?

- Friend/Neighbor/Family Newspaper Public Radio
 Studied here before Website Other, please name:

An annual Registration Fee of \$35 is required of all PRIVATE LESSON students and must be paid along with Tuition. The Registration Fee for additional students from the same family is \$20. A \$15 fee per semester will be applied to those accounts choosing the Two Payment Plan option.

Total enclosed
\$

I understand that is enrolling for weeks.

I have read and agree to the enrollment policies of The Music Academy.

Ballet at the Music Academy: Fall-Spring 2010-2011

Student's name: _____

Student's date of birth, age, and grade: _____

Parents' names: _____

Telephone numbers: _____

Email addresses: _____

Postal address: _____

Medical concerns: _____

Total classes scheduled: _____

Description of class: _____

Scheduled time of class: _____

Tuition per semester: _____

Description of class: _____

Scheduled time of class: _____

Tuition per semester: _____

Description of class: _____

Scheduled time of class: _____

Tuition per semester: _____

Description of class: _____

Scheduled time of class: _____

Tuition per semester: _____

Registration fee: \$25 for first family member; \$15 for additional family members

Total tuition (per student) + registration fee: _____

I understand that _____ is enrolling for dance classes at The Music Academy. I have read and agree to the enrollment policies of The Music Academy.

Group Registration

To register for any Group program, please complete the form at right and return to:

The Music Academy
3091 Enterprise Drive D
State College, PA 16801

The instruction is really helpful and the teachers really know what they're doing, not just knowing how to play something but knowing how to teach their students so they understand.

— Marina B

The Music Academy

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Group Registration Form

School Year 2010–2011

Please complete this form and return.

Date

CONTACT INFORMATION

Student name	Age (N/A for adults)
Local Address	<input type="checkbox"/> Male <input type="checkbox"/> Female
City/State/ZIP	
Home phone	Cell phone

RESPONSIBLE FOR BILLING (Non-applicable for Adult Students)

Mother's name	Father's name
Address same as above? <input type="checkbox"/> Yes <input type="checkbox"/> No*	
* If no, provide alternative address:	
City/State/ZIP	
Mother's place of work	Mother's work phone
Father's place of work	Father's work phone
Email address	

EMERGENCY INFORMATION (Non-applicable for Adult Students)

Emergency contact person	
Phone	Relationship to student

PREVIOUS MUSIC OR DANCE STUDY

List previous instruction:	
Indicate the GROUP CLASS/time for which you are enrolling:	
Are you a: <input type="checkbox"/> New student <input type="checkbox"/> Returning student	Number of years of previous instruction:
Name of previous teacher(s):	

How did you learn about The Music Academy?

- Friend/Neighbor/Family Newspaper Public Radio
 Studied here before Website Other, please name:

Total enclosed
\$

I understand that is enrolling for weeks.

I have read and agree to the enrollment policies of The Music Academy.