Students Last Name	First Name	Date of Birth (DD/MM/YYYY)			Current Age		
Mailing Address	City/Province	Postal Co	de	Home Phone #			
Work Phone #	Cell # (Text? Yes or No)	Email Add	Iress	Emergency Contact			
Teacher Assigned	Type of Music Program	Private	Alternating	Remote	Parent/Guardian		
C	, , , , , , , , , , , , , , , , , , ,	Min			Name		
Lesson Day	Lesson Time	First Lesson Date			Last Lesson Date		
Previous Experience	Current Level	Vel How did you hear about us?					
PAYMENT OPTIONS: Pre-Authorized VISA/MC or MONTHLY CHEQUES							
Credit cards will be processed 2-4 days prior to each new month							
(Check one) Credit Card Number (please include spaces) Expiry Date					Expiry Date		
☐ MASTER CARD	□ <mark>VISA</mark>						
I authorize Skyline Music to make such monthly charges on my Visa/MC, as I will comply with the studio policies given							

	Lesson Dates:	Visa/MC Payments		<u>Cheque</u>	e/Debit
MONTHLY CHEQUES: Post Dated on the 1st of each month.	30 mins \$35 45 mins \$52.50 60 mins \$70	Amount (\$)	Date Processed	Amount (\$)	Cheque #
REGISTRATION FEE (pre-paid)	\$45/Student (\$80/family)				
September (pre-paid)					
October					
November					
December					
January					
February					
March					
April					
May					
June					
July/August (optional)					

<mark>Signature</mark>	Da Da	te:	
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