Students Last Name	First Name	Date of Birth (MM/DD/YYYY)	Current Age				
Mailing Address	City/Province	Postal Code	Home Phone #				
Work Phone #	Cell # (Text? Yes or No)	Email Address	Emergency Contact				
Teacher Assigned	Lesson Type	Private Alternating Remote	Parent/Guardian Name				
Lesson Day	Lesson Time	First Lesson Date Last Lesson Date					
Previous Experience							
PAYMENT OPTIONS: Pre-Authorized VISA/MC, E-Transfer, or MONTHLY CHEQUES							
	Credit cards will be processe	d 2-4 days prior to each new month					
(Check one) MASTER CARD		Credit Card Number (please include spaces) Expiry Date					
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		Cheque/Debit	
MONTHLY CHEQUES: Post Dated on the 1 st of each month.	30 mins \$36.00 45 mins \$54.00 60 mins \$72.00	Amount (\$)	Date Processed	Amount (\$)	Cheque #
REGISTRATION FEE (pre-paid)	\$50/Student (\$85/family)				
September (pre-paid)					
October					
November					
December					
January					
February					
March					
April					
May					
June					
July/August (optional)					

<mark>Signature</mark>	_ <mark>Date</mark> :