



Fall 2009

Lesson Pre-Registration Form

I intend to register for private music lessons with Creative Music Center this fall.

Student 1 Name _____ Birthday _____ Teacher _____
____ I would like to keep my current lesson day/time of _____
____ I would like to change my current lesson day/time to _____

Student 2 Name _____ Birthday _____ Teacher _____
____ I would like to keep my current lesson day/time of _____
____ I would like to change my current lesson day/time to _____

Student 3 Name _____ Birthday _____ Teacher _____
____ I would like to keep my current lesson day/time of _____
____ I would like to change my current lesson day/time to _____

**** We will do our best to accommodate your request for a day/time change, however, please keep in mind that we may not be able to at this time****

Parent Name _____
Address _____
Phone _____ Cell _____

Parent Signature Date Total Fee Paid

****A non-refundable \$50 deposit per student must be submitted with this form.****

(The fee will be applied to your fall lesson charges.)

Time slots cannot be guaranteed after August 14, 2009.

____ Please charge the fee to my credit card _____
Credit Card Number Expiration

Creative Music Center
701 Main Street, Monroe, CT 06468 (203) 261-7301
THIS FORM MAY BE FAXED TO (203) 459-1772