



APPLICATION FOR (PLEASE CHECK ONE):

NEW GROUP STUDENT RETURNING STUDENT WAITING LIST

DESIRED START DATE _____ / _____ / _____

PROGRAM

Program interested in (please check one):

- Mommy & Me Beginning Level 1 Level 2 Level 3 Level 4

APPLICANT INFORMATION

Name _____
Please print First Middle Last Preferred Name

Home Address _____ City _____ State _____ Zip Code _____

Home/Cell Telephone () _____ Work Telephone () _____ Date of birth _____ / _____ / _____ Age _____

Male Female Special Care (Allergies, asthma, disabilities) _____

Current School _____ City _____

Current Music School/ Music Teacher _____

How did you hear about our school? _____

APPLICANT'S FAMILY

Name _____ Name _____

Relationship: Father Stepfather Guardian Relationship: Mother Stepmother Guardian

Work Telephone () _____ Work Telephone () _____

Mobile Telephone () _____ Mobile Telephone () _____

Email: _____ Email: _____

Occupation _____ Occupation _____

Employer _____ Employer _____

Student lives with: Both Parents Mother Father Guardian Other _____

Are there any court orders restricting the legal rights of either parent? Yes No

If you answered "yes," please provide a copy of the court order.

Custody Schedule

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
WEEK 1						WEEK 2					



SIBLING INFORMATION

Sibling's Name	Age	Older	Younger
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

****CERTIFICATION AND RELEASE:** I certify that I am the legal guardian/parent for this student. I have read and understand the application and the statements made by me are complete and true to the best of my knowledge and belief. I hereby authorize Piano4Everyone and/or its agents (hereafter "company") the right to use my child's photographs for the purpose and/or use, in promotional and educational materials including, but not limited to pamphlets, websites and brochures. I acknowledge that company shall have all copyrights in and of such photographs and may use such copyrights fully. I hereby release company and its administration from all liability connected with the taking and use of said materials. In addition, I waive all rights, interests, or claims for payment in connection with any exhibition or release of said materials. I acknowledge that this consent is voluntary.

In addition, I understand that there is a non-refundable registration fee. Should the Piano4Everyone cancel a class, we will issue a transfer, credit or full refund. Classes must meet the minimum enrollment. I understand that there is only one make-up class per session. I am committing to pay according to the program and payment plan chosen. I do hereby release and forever discharge Piano4Everyone, the studio instructor, and the studio owners, from any and all actions, claims, and demands for, upon or by reason of damage, loss or personal injury which may be sustained by my child or myself during the course of or as a result of this musical activity.

We (I) certify that the information provided on this application is true and accurate.

Signature of Parent/Guardian

Date

Please submit this application by postal mail or email to:

PIANO4EVERYONE
6047 TAMPA AVE., SUITE 309
TARZANA, CA 91356

P. 310.926.3080 F 818-332-4136
piano@piano4everyone.com