

Student's Instrum	ent		Student's Name	
Address				
Street	İ	City	Zip Code	
Home Phone	E-mail	E-mail Address		
First month's tuition	+ Registration Fee	= First Pa	yment of	
	Price per each month ***Due on the 25 th of th			
Start Date:	Day/Time:	Teacher:		
policy documen I agree to observ given by the em I agree to pay for	a copy of and agree to all the pol t, including but not limited to tu e and obey all posted rules, and ployees or representatives of LA	uition and missed le further agree to fol AFARGUE PIANO LAFARGUE PIAN ent, reckless, or will	low any verbal instructions or directions S and LAFARGUE MUSIC SCHOOL. IOS and/or LAFARGUE MUSIC ful actions.	
Signature of Guardian		Date		
In case of emergency, ple	ase call		·	
Relationship	Phone numb	oer		
Credit Card Type / #:	I	Exp. Date:	Security Code:	