



LAFARGUE PIANOS
NEW STUDENT REGISTRATION

Student's Name _____ Student's Instrument _____

Address _____
Street _____ City _____ Zip Code _____

Mother's Name _____ Father's Name _____

Mother's Cell Phone _____ Father's Cell Phone _____

Home Phone _____ E-mail Address _____

First month's tuition _____ + Registration Fee _____ = First Payment of _____

Price per month thereafter: _____
*** Due on the 25th of the month prior to lessons

First lesson day and time: _____

Please initial and sign below.

- _____ I agree to provide my child with a properly maintained instrument on which to practice and will help my child adhere to a regular practice routine.
- _____ I have received a copy of and agree to all the policies of LAFARGUE MUSIC SCHOOL as outlined in the policy document, including but not limited to tuition and missed lessons.
- _____ I agree to observe and obey all posted rules, and further agree to follow any verbal instructions or directions given by the employees or representatives of LAFARGUE PIANOS and LAFARGUE MUSIC SCHOOL.
- _____ I understand that all students under the age of 12 must be accompanied by an adult parent or guardian. Because our music school is on the second floor, it is the responsibility of the student's escort to ensure that the student arrive and leaves the teacher's direct care safely. Children should never enter, exit, or walk in building alone.
- _____ I agree to pay for all damages to the facilities of LAFARGUE PIANOS and/or LAFARGUE MUSIC SCHOOL caused by my or my family's negligent, reckless, or willful actions.

Signature of guardian

Date

In case of emergency, please call _____ Relationship _____

Phone number _____