



== Student Enrollment Form ==

Date: _____, 20

Student Name: Last _____ First _____ M.I. _____

If under 18, age: _____

Mailing Name: Parent/Guardian Last name _____

First name _____

Mailing Address: Street _____

City _____, IL Zip _____

Phone & E-mail: Home _____ Cell _____

E-mail _____

Emergency Contact: Name _____ Relationship _____

Phone number _____

Please tell us if this student has any health concerns or learning disabilities of which the instructor should be aware.

Instrument: _____, Instructor: _____

Lesson Time Length: 30 45 60 minutes (Circle one that applies.)

How did you learn about the *Midwest Conservatory of Music*? _____

Tuition Payment Option (please select one)

___ One installment – The payment is due during the first week of each quarter.

___ Two equal installments – The initial payment is due during the first week of each quarter and the second payment is due by 10/15 for Fall, 1/15 for Winter, 4/15 for Spring and 7/15 for Summer.

***I have read the attached policies and agree to all the terms of this registration.

Signature _____ Date _____