

Registration Form: Philomusica- A European School of Music

Mother's Full Name _____ Father's Full Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Mom's Cell/Wk _____ Dad's Cell/Wk _____

Emergency # _____ e-mail address _____

How did you hear about us? Whom May We Thank? _____

Parents' Musical Background, if any _____

Child 1

Last Name _____ First Name _____ Code(*for office use only*) _____ Enrolling in

What? _____ Day _____ Time _____ Code (*office use only*) _____ Age _____ DOB _____ Sex _____

Name of School Attending _____ Grade _____ Notes (medical, special needs) _____

Child 2

Last Name _____ First Name _____ Code(*for office use only*) _____ Enrolling in

What? _____ Day _____ Time _____ Code (*office use only*) _____ Age _____ DOB _____ Sex _____

Name of School Attending _____ Grade _____ Notes (medical, special needs) _____

Registration Fee.

A non-refundable fee of \$25 for the Early Childhood program or \$35 per student for Group piano and Private Instrumental lessons is required yearly at time of registration.

Payment of fees.

The registration fee plus first month of tuition can be paid by check or credit card at time of enrollment. All subsequent payments will be collected by automatic withdrawal from your credit card account

Payment by Automatic Credit Card Charge.

Tuition will be charged to your credit card on the 1st day of each month. The month of September is non-refundable. You must sign an automatic credit card charge authorization form. Credit card payments are not accepted for in-person payment on a monthly basis. Payment must be made by pre-authorized automatic monthly payment.

Withdrawal and refunds.

30 Days notice is required to discontinue any classes. Withdrawal must be done in person and will not be accepted over the phone. Withdrawal must be done at the School office and not with the teacher. To withdraw from lessons, a parent or adult student must:

1. Inform School administration; and,
2. Complete and sign a withdrawal form provided by the School office.

All automatic credit card charges will stop after the 30 days notice.

Termination.

Philomusica reserves the right to terminate lessons to any student without notice. In such cases, a refund for unused lessons will be given.

Philomusica Credit Card Authorization Form

I _____ hereby authorize Philomusica to charge my credit card: VISA or

MC Exp. Date _____ # _____ in the amount of

_____ on the first day of each month beginning _____ and ending with the

last withdrawal on _____. I understand that I must give Philomusica one month's notice from

the first of the month to discontinue these charges.

Authorizing Signature

Date

<p>EARLY CHILDHOOD PROGRAM</p> <p>Sick children. <i>Please, please, do not bring sick children to class!</i> Runny nose, sniffles, coughs...We would like to prevent the spread of illness to our families, so please be considerate if your child is contagious.</p> <p>Make up classes. Students who miss a class may come to another class if the School is notified 48 hours in advance.</p>	<p>_____</p> <p>_____</p>
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<p>GROUP PIANO CLASSES</p> <p>Make up classes. The School must be notified 48 hours in advance in order to receive a make up lesson. Group classes may be rescheduled dependent upon availability.</p>	<p>_____</p>
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<p>INSTRUMENTAL INDIVIDUAL CLASSES</p> <p>Missed lesson & make up lessons. Absolutely no make up lessons will be given for missed lessons unless absence is due to serious illness and notice has been given to the School office. (Simply not feeling well this day does not count!) Make up lessons will be limited to three per semester. No refunds given for missed/no show lessons. (School activities such as ski-trips or programs, spring breaks that differ from the Poudre Valley School district, sports games, etc. do not qualify for make-up lessons.)</p> <p>Substitutions. The School reserves the right to provide a substitute teacher if the regularly scheduled teacher is ill or otherwise unable to attend a lesson. If the teacher is ill and the School cannot arrange a substitute, any missed lessons will be made up. A refund or reduction in fees cannot be given.</p>	<p>_____</p> <p>_____</p>
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<p>GENERAL POLICIES FOR ALL CLASSES & LESSONS</p>	
<p>Sick children. <i>Please, please, do not bring sick children to class!</i> Runny nose, sniffles, coughs...We would like to prevent the spread of illness to our families, so please be considerate if your child is contagious.</p>	<p>_____</p>
<p>Care of students. The School is not responsible for providing before or after class care for students. Students are not to be left at the School for an excessive amount of time before or after lessons.</p>	<p>_____</p>
<p>Parent's responsibility to be aware of dates & events. It is the responsibility of the parent or adult student to be aware of School activities such as recitals and dates the School is open and closed. The School will post notices on the bulletin board. It is the parent's responsibility to regularly check the board to ensure they are informed. Also, please inform the School promptly of any address or telephone number change.</p>	<p>_____</p>
<p>Injuries. Parents, legal guardians of minor students and adult students waive the right to any legal action for any injury sustained on School property resulting from normal lesson activity or any other activity conducted by the students before, during or after lesson time.</p>	<p>_____</p>
<p>Photo and video release. The School is hereby granted permission to take photographs and video of students for use in brochures, websites, posters, advertisements and other promotional materials the School creates. Permission is also granted for the School to copyright such photographs and video footage in its name.</p>	<p>_____</p>
<p>A word on parental videotaping. We do not allow video recording for security and privacy reasons concerning other students.</p>	<p>_____</p>

I have read and understand the above policies and the General Policies for all Classes and Lessons on this page and agree to abide by them.

Signature of Parent or Adult Student (please print) Parent AND Student Name
Date