



Carolina Music Academy

Please PRINT and complete all fields.

Student's Name: _____

Address: _____ City / Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Student's Email _____

Student is: Adult _____ Youth _____ DOB (optional) : ____ / ____
Month Year

Parent / Legal Guardian _____

Parent / Legal Guardian Email _____

I wish to enroll the above student for lessons in: Instrument: _____

Teacher: _____

I understand that Carolina Music Academy is a year-round school and that I will select one option to fulfill this criterion of the school. If I find that we must terminate our lessons I agree to **notify the business office in writing 30 days prior to the end of the month of the last lesson to be taken**. There is a re-enrollment fee for those who have terminated and decide to re-register with Carolina Music Academy, Inc. I agree to pay Carolina Music Academy, Inc. all fees associated with the calendar option I choose.

Parent/Legal Guardian Signature: _____ Date: _____
or

Adult Student Signature: _____ Date: _____

SC Drivers License or Identification Card number: _____

Select One: _____ **Option 1 (All Adults)Year-round** – Weekly half-hour lessons when the Academy is open until the office receives 30 day written notice as stated above. Payment is due by the 10th of each month. During June & July there will be 4 half-hour lessons per month regardless of the number of weeks in the month.

_____ **Option 2 (Youth Only) Aug – May weekly half-hour lessons with Enrichment Classes to replace June and July lessons** – Payment is due by the 10th of each month including the months of June and July. A 30 day written notice as stated above is required to terminate the lessons.

_____ **Option 3 Summer Only** – Six half-hour lessons. Tuition must be paid in full prior to the first lesson.

Registration Fee: _____ Current Monthly Tuition: _____ (subject to change)

How did you learn about Carolina Music Academy, Inc.? _____

Paid: _____ Cash _____ Check # _____

I release Carolina Music Academy to photograph likenesses of my child(ren) for use in promotional material and Carolina Music Academy's website. I understand these photographs may be edited at the discretion of Carolina Music Academy and may be published in promotional brochures, websites, newspapers, and other media. I hereby waive all rights to compensation for the use of these photographs.

Printed Name _____ Relationship to Student _____

Signature _____ Date _____