

Sound Of Thunder Studio

Private Lesson Registration Form

Date Rec'd _____ Office Use Only

Please mail with check, or bring to your first lesson:

Sound Of Thunder Studio, 78 Holden Road, Shirley, MA 01464 Tel. (978) 425-2794

Note that your first payment will cover the first 5 lessons, including the first, free lesson. Students electing not to continue after the first trial lesson will have their payment returned by mail within 7 days. I will not deposit a tuition check until a student has committed to continuing lessons. I will return the uncashed check to any student who does not elect to continue past the first free lesson.

One registration form must be filled out for each student.

Please Print:

Student Name _____ Date of Birth _____ Male/Female _____

Parent/Guardian _____

Phone (H) (____)____-____ (W) (____)____-____

Mailing Address _____

City/State/Zip _____

E-Mail Address _____

New Students: On the reverse side of this sheet, briefly tell us about the student (study/practice habits, teaching style student relates best to, special needs, personal goals for music study, music styles of interest e.g. rock, folk, pop, classical, jazz). Attach additional sheets, if necessary. Please write legibly.

Instrument Guitar/Bass _____

Student Availability (Please list all options that you are willing to consider.)

Thurs.

_____ *could arrive*

_____ *must leave*

{ Office use: Time:_____ }

Tuition: \$20 (30 min.)

I have read Sound Of Thunder Studio Lesson Policies and agree to abide by them:

(signature of parent/guardian or adult student)

Date