DES MOINES SYMPHONY
ACADEMY

2017-2018 Private Lessons Registration Form

PRIVATE LESSONS INFORMATION

Piano
□ Ahmad
□ Brutian-Grant
□ Giunta
□ Helmich
□ Rubin

Violin
□ Akhatova
□ Brechtel
□ Helmich
□ Miranda
□ Salamone

□ **Viola** – Miranda
□ **Cello** – Chang
□ **Bass** – Charlson

□ **Flute** – Stein
□ **Trumpet** – Baughman
□ **Trombone** – Maday
□ **Percussion** – Williams

LESSON SCHEDULE INFORMATION

□ 30-minute
□ 45-minute
□ 60-minute

START DATE: _____
LESSON DAY: _____
LESSON TIME: _____

Family Referral Name: _____

STUDENT REGISTRATION INFORMATION

Student Name _____ Student Birth date ___/____/_____

Mailing address _____

City _____ State IA Zip _____

Primary/Billing Email address _____

Secondary Email address(es) _____

School _____ Grade 2017-2018 _____ Student Cell _____

Parent/Guardian _____ Primary Phone _____

Place of Employment _____ Work Phone _____

Parent/Guardian _____ Primary Phone _____

Place of Employment _____ Work Phone _____

PARENT/GUARDIAN POLICIES ACKNOWLEDGEMENT

By initialing and signing below, I acknowledge and accept the following:

1. I have received a copy of the Symphony Academy's Private Lessons Tuition, Attendance and Student Safety Policies and understand my responsibilities and obligations regarding tuition, attendance and student safety. **_____(initials)**
2. I grant permission for photos/video to be taken of my child for use in Symphony Academy promotional materials. **_____(initials)**

_____ _____
Parent/Guardian Signature Date

TUITION PAYMENT METHOD

□ AUTOCHARGE Card No.: _____ Exp. Date: _____
(your credit card number will be kept securely on file)

□ MONTHLY INSTALLMENTS (checks should be made payable to Des Moines Symphony Academy)

Completed Registration Forms can be returned to **Joshua Barlage, Managing Director,**
Des Moines Symphony Academy, 1011 Locust Street, Suite 400, Des Moines, IA 50309
or e-mailed to **joshua@dmsymphony.org**