



DES MOINES SYMPHONY
ACADEMY

2017-2018 Private Lessons Registration Form

PRIVATE LESSONS INFORMATION

Piano

- Ahmad
- Brutian-Grant
- Giunta
- Helmich
- Rubin

Violin

- Brechtel
- Helmich
- Miranda
- Salamone

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

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

LESSON SCHEDULE INFORMATION

- 30-minute START DATE: _____
- 45-minute LESSON DAY: _____
- 60-minute 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 academyregistrar@dmsymphony.org