

Jean's Academy of Music

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REGISTRATION FORM 2017/18

Please complete and return this form accompanied by the registration fee of \$30.00 for each individual or \$60.00 per family. *The registration fees are non-refundable.* Please read the policy carefully. Your signature on this form indicates your acceptance of the policy.

DISCIPLINE: (circle choice) PIANO: LEVEL/GRADE: _____
THEORY: 5, 6, 7, 8 HISTORY: 9, 10, ARCT HARMONY: 9, 10
PEDAGOGY: elementary, intermediate, advanced

Surname _____ Student Name _____
Parent's _____ Birth date: _____ Age: _____
Full Address _____ Postal Code _____
Phone # _____ Email Address _____
Cell # Parent _____ Cell # Student _____
School attending _____ Grade _____ (fall 2017)

Emergency Contact _____
Allergies _____

Previous Piano Instructor _____
RCME#: _____ Latest RCM exam taken: _____

Lesson Time Required: 30 min. 45 min. 60 min.
(Beginner yr. 1 & 2) (Recommended for 3rd yr beginner – Gr. 4) (Gr. 5 – 10)

Days and Times requested: 1. _____
2. _____
3. _____

Student Agreement: I agree to:

1. Practice daily (5 – 6 days a week)
2. Prepare the complete lesson assignment weekly
3. Keep nails cut short
4. Avoid chewing gum during lessons

Student signature: _____

Parent/Guardian Agreement:

I have received and read the policy sheet and will adhere to the requirements.
I will abide by the parking guidelines.

PARENT SIGNATURE: _____

REGISTRATION FEE PAID: CASH _____ CHEQUE # _____