

STUDENT INFORMATION *One form for each student*

 Student: _____ M F Date of Birth: _____ School: _____

Student Address: _____ City: _____ Zip: _____

 Primary Guardian Mr. Mrs. Ms. Dr.: _____ Relation to Student: _____

 Primary Guardian Phone: _____ Home Work
 Cell Primary Email: _____

Primary Guardian / Billing Address (if different from student): _____

 Secondary Guardian Mr. Mrs. Ms. Dr.: _____ Relation to Student: _____

 Secondary Guardian Phone: _____ Home Work
 Cell Secondary Email: _____

Student Email (age 13+) to receive "Music Notes" and "Counterpoints" e-newsletters from Powers: _____

The following information is requested by state and federal funding sources (check appropriate box):
 Black / African American Asian Hispanic American Indian White/Caucasian Other:

PROGRAM INFORMATION

Fill out this section as completely as possible. Include all programs you are registering for, and all applicable discounts below. Please refer to our 2016-2017 Tuition Schedule sheet or Tuition webpage for accurate rates and discounts. If you are opting to enroll in a payment plan, please include the \$25 payment plan fee (per semester) below, and information about the remaining balance and payments will be sent to you.

Programs	Instrument	Teacher Name	Lesson Length	Preferred Days and Times	Semester Tuition
Private Lesson 1 st Instrument			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		
Private Lesson 2 nd Instrument			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		
Suzuki Private Lesson			<input type="checkbox"/> 30 <input type="checkbox"/> 45 <input type="checkbox"/> 60		

	Program Name	Day/Time	Semester Tuition *
Orchestra* Theory Ensemble Other Group/Class			

 Annual Registration Fee (\$40 per student)
 (If applicable) Payment Plan Fee (\$25 per family, per semester)
 (If applicable) Materials Fee
 (If applicable) Discount

TOTAL	
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PAYMENT INFORMATION *Appropriate payment must accompany this registration from in order to be processed.*
 I am applying for Financial Aid. I have attached my Financial Aid Application and the \$40 annual registration fee

 Please enroll me in a Monthly Payment Plan. If a check payment is not received by the 1st business day of the month, the credit card on file will be automatically charged. A \$25 payment plan processing fee per semester applies.

 Check #: _____ (make payable to Powers Music School) Amount \$: _____

 Please charge my: Mastercard Visa Discover AMEX

Card #: _____ Exp. Date: _____ CID #: _____

By providing a credit card, you are authorizing Powers Music School to charge any current balance at time due.

Office Use Only	
Date:	Amount:
Initials:	App. Code:

My signature indicates that I have read and understand Powers Music School policies and accept responsibility for all charges and fees that may be incurred. I allow full use of photographs and videos taken of the above registered student at all Powers Music School sponsored events.
SIGNATURE REQUIRED (must be 18 years or older): _____ Date: _____

EMERGENCY CONTACT:

Name Mr. Mrs. Ms. Dr.:

Relation to Student:

Phone:

Home Work Cell

Email:

AUTHORIZED FOR STUDENT PICK-UP:

Name Mr. Mrs. Ms. Dr.:

Relation to Student:

Phone:

Home Work Cell

Email:

ADDITIONAL INFORMATION

1. We are working to reduce our printing costs and be environmentally friendly – please let us know below if you prefer Powers brochures throughout the year to be emailed or hard copies mailed to you throughout the year.

- I prefer brochures and program information from Powers Music School to be emailed to me.
- I prefer brochures and program information from Powers Music School to be mailed to my home.

2. How did you first hear about Powers Music School?

- I am a current/former student.
- Heard about Powers from a friend.
- Heard about Powers from a student, faculty member, or board member of Powers.
- Heard about Powers from a private lesson teacher.
- Heard about Powers from a school music department teacher or band leader.
- Saw a flyer in the community
- Saw a brochure in the community
- Saw a sign on the street
- Received a postcard or brochure in the mail
- Newspaper
- Magazine
- Google / Internet search
- Facebook
- Youtube
- Twitter
- Powers email newsletter
- Online calendar listing

3. Volunteer at Powers!

Parents, students, and family members can get involved in many ways: concert and event set-up/tear-down, receptions, office tasks, publicity, internships, parent committees, board positions, and more!

- Yes, I am interested in volunteering at Powers. Please send us more information about how we can help.
(Please tell us a little about your interests and skills here)

Powers Music School does not discriminate on the basis of age, race, color, nationality, ethnic origin, religious belief, gender, or sexual orientation in its employment practices or in the administration of its educational policies.

Powers Music School, P.O. Box 398, Belmont, MA 02478 | Phone: (617) 484-4696 | www.powersmusic.org