



Musical Theatre

NEW CAMPER

RETURNING CAMPER

DATE: ____ / ____ / ____

STUDENT REGISTRATION

| | | | | |
|--|---------------------------------|--------------------|--|----------------|
| Last Name <i>(Please Print)</i> | | First Name | | MI |
| Father's Name | | | Mother's Name | |
| Street | | City | | State Zip Code |
| Home Phone | | Work or Cell Phone | | E-mail |
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | DOB: | Age: | School: Grade: |
| Emergency Contact: | | | Relationship: | Phone: |
| Music Experience: | | | Do you have a piano in your home? <input type="checkbox"/> Yes <input type="checkbox"/> No Other instruments? _____ | |
| REFUND POLICY: If Joyful Sounds must cancel a class, a full refund will be returned to you. If you withdraw two weeks before class begins, a full refund will be given. If you withdraw before the second class meeting, Joyful Sounds will refund 50% of your tuition, but no material or registration fees will be refunded. There are no refunds after the second class meeting. | | | | |
| PARENT SIGNATURE | | | | DATE |

| Musical Title | Cost | Timely Discount | Total | FOR OFFICE USE ONLY | |
|---|-------|--|-------|--|-------------------------------|
| | | | | Date Rec'd: _____ | Amt: \$ _____ |
| SHR, Jr. (Bring a Friend) Your Friend: _____ | \$275 | | | <input type="checkbox"/> Cash | |
| SHR, JR. (1 Camper) | \$375 | | | <input type="checkbox"/> Check # _____ | |
| Jungle Party Tonight (1 Camper) | \$250 | -\$50 <small>Register by 6/1/2010</small> | | <input type="checkbox"/> Credit _____ | <small>Approval Code:</small> |
| BALANCE DUE | | | | Received by: _____ | |

PAYMENT METHOD: Full Payment is due at the time of Registration. (Payable to: Joyful Sounds)

Check Enclosed: Amount: _____ Credit Card: VISA Master Card Discover

Card No: _____ Exp. Date: ____ / ____

Billing Address and Zip: _____

Send payment to: Joyful Sounds School of Music, 21 Newport Drive, Suite B, Forest Hill MD 21050

PHOTO RELEASE

The school is hereby granted permission to take photographs of my student to use in brochures, web sites, posters, advertisements and other promotional materials for our school. Permission is also granted for the school to copyright such photographs.

YES, I grant permission. NO, I do not grant permission.

Date _____ Parent Signature _____