



2016-2017 Student Registration Form

Date _____

Student Name _____ Date of Birth _____

School _____ Grade _____

Instrument _____ Years of Experience _____

Other instruments studied _____

Teacher Request _____

Parent/Guardian Name _____

Email Address _____

Street Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Preferred Method(s) of Contact (please check):

Home Phone Cell Phone Work Phone Email

Text Message (please specify which number) _____

Emergency Contact _____ Phone _____

Relationship to student _____

I have received a copy of the Bach Parley String Academy Lesson Fees and Attendance Policies and agree to abide by the stated policies.

Parent/Guardian/Adult Student's Signature _____

I give permission for photos of my child/me to be used in Tallahassee Bach Parley promotional materials. Yes No

Parent/Guardian/Adult Student's Signature _____