

## Music Enrollment Form 2010-2011

- o Yes, Please enroll my child in music class. I agree to pay as billed, \$20.00 per month. Music classes will be held on Thursdays. I understand that I must give a one month notice if I wish to withdraw from music class, and that there is no refund or credit for classes missed due to vacation or sick time.

Please sign up my children as follows:

Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_