



Date of 1st lesson:

Student Information

Please print the following information

Location:

Teacher:

Student's Full Name

Date of Birth

Age

Mailing Address

School

Grade

City

Zip Code

Nickname

How did you find out about us?

Instrument

Parent Information

Mother's Name

Father's Name

Address

Address

City

Zip Code

City

Zip Code

Home Phone

Cell or Work Phone

Home Phone

Cell or Work Phone

Email Address

Email Address

Payment Information

Send an invoice via email to _____ (statements are also viewable/payable online)

Send an invoice via US mail

Bill my credit card (American Express, VISA, MasterCard, Discover)

Credit Card Number

3 or 4 digit CVV#
(on back of card)

Expiration Date

I understand that I am authorizing the Albertson School of Music to charge my credit card on a monthly basis for lessons, books, instrument rental (if applicable) and other materials and fees. I may cancel this automatic billing authorization at any time by contacting Albertson School of Music.

Signature of Credit Card Holder

Date

I understand that I am enrolling my child in music lessons with the Albertson School of Music. I have read the billing policies and procedures. I understand that canceled lessons may be rescheduled if time is available; and to be eligible, I must notify the school director at least 24 hours prior to the lesson time. I understand that tuition is based on enrollment and not attendance. Should my child fail to attend a lesson for any reason, including sickness, family emergencies or holidays, I am still obligated to pay for the lesson. In the event of school closure due to severe weather, I may attempt to reschedule any missed lessons based on availability, but tuition will not be prorated and a reschedule fee may be assessed. In the event that my regular teacher is absent, I understand that the school may provide a substitute teacher with or without notice to conduct the lesson and if a substitute is provided, I do not have the option of rescheduling the lesson.
(Student handbook is available online at www.albertsonschoolofmusic.com/handbook.pdf)

I understand that my monthly tuition for lessons has been based on an annual amount, and is not prorated due to holiday closures. I also understand that the price of any books or supplies provided to my child is not included in my tuition and will be added to my monthly invoice. I understand that books and supplies are non-returnable. I understand that all billing and scheduling discussions must be conducted with the school director, not the teacher.

I understand that I am permitted to watch my child's lesson if I so choose. I also understand that the Albertson School of Music is not responsible for any unattended children before, during, or after lessons. If I choose to drop off my child for their lesson, I will be at the school promptly at the end of the lesson to pick up my child. I will ensure that any children under my care are supervised at all times.

I understand that I must give **2 weeks notice** to the school director prior to discontinuing lessons and that the Albertson School of Music may discontinue lessons at any time and for any reason, including, but not limited to: disciplinary problems, lack of teaching resources, scheduling conflicts, or a student's lack of practice.

Signature of Parent or Guardian

Date

Billing Questions 349-0090 x2 or billing@albertsonmusic.com

Scheduling Questions 349-0090 x3 or scheduling@albertsonmusic.com