



cleveland
pianostudio

ph: 561.272.6143 (h) / 978.879.6227 (c) **em:** juliecleland@mac.com **web:** clevelandpianostudio.com

address: 203 North Seacrest Circle, Delray Beach, FL 33444

REGISTRATION FORM

Please fill out and enclose this form with your signed contract, lesson schedule form, and tuition deposit (please see the enclosed *Studio Policy*). Please return to me no later than August 20.* Fall Semester begins Tuesday, August 26. Thank you!

Parent/Student Info

Parents' Name: _____ e-mail: _____

Student's Name: _____ Age/Birthday: _____

Grade: _____ School: _____

I would be interested in having my child perform/participate in regional recitals and/or competitions. Please give me more information at the first lesson.

Cleveland Piano Studio Invoice

<input type="checkbox"/> I will be paying yearly tuition in:	AMOUNT:
1 yearly payment _____ , 2 semester payments _____ ,	
4 half-semester payments _____ , 10 monthly payments* _____	_____

I wish to subscribe to the *Piano Explorer* magazine for kids (\$8/per year) _____

I have enclosed my refundable** Spring Recital deposit (\$10) _____

Total Enclosed: _____

Please make checks payable to: **Cleveland Piano Studio** or **Julie Cleveland**. Thank you.

*Note: If you choose the *monthly* installment plan, the 1st payment is due by August 1, not August 20. See under "Tuition" in the *Studio Policy*.

**This payment helps defray the costs of producing the spring recital (rental of hall, refreshments, awards, etc.). It is fully refundable if the student terminates lessons before the May 2009 recital. No refund is given if any balance is due at the time of termination or if insufficient termination notice is given (less than 30 days).