PRIVATE STRINGS LESSONS REQUEST FORM

(Diopos should we said to	Staff Completes T		uth Director
Amount Paid:	Date Paid:	Paul Briney, Association You Staff Initial	
Do you have an instrume	nt: Y/N If no, please wait	until the initial lesson for instrument re	ental or purchase guidance.
Musician's Name (first and	l last):		
Musician's Date of Birth:			M F
Parent's/Guardian's Name	:		
Address:			
Main Phone:			
Alternate Phone:			
Special Concerns/Request	s:		
Preferred Days/Times for	Lessons:		
☐ Private (Eight 30-minut	e lessons) \$240.00 for m	nembers or \$240.00 for p	ublic
needs. The opportunity for pa facilitate skill acquisition. The opportunity to school General Information about All lessons consist of eight of the information about in the event of an injust sessions included in the requested.) All Private Lesson Packethold Any special requests of	trons to progress at a pace trons who wish to focus on on. edule lessons at a time that Private Lessons: ight ½ lessons and must be tend a scheduled lesson, no not toward the eight sessions ry or severe illness, the ses e full fee. (Please note, a wages expire 1 year after pur physical concerns should lesson.	they set, in an environment a particular skill(s) in a one- t is convenient for our patro paid for in advance. Stice of at least 24 hours must included in the full fee. Sion may be rescheduled as ritten notice from a health c	on-one environment to ns. st be given, or the part of the four are provider may be
I have read and understand to County Y:	he above information and a	gree to follow all rules and p	policies of the Door
Signature:		Date:	
Date/Time of Lesson	Instructor	Location	

