



Student Name: _____

TO BE SUBMITTED TO HMA*

* TO CONFIRM or CONTINUE ENROLLMENT; Registration Form, Deposit and First Tuition Payment must be received no less than 3 business days prior to first scheduled lesson. (see policy)

REGISTRATION - RENEWAL FORM HMA Academic Year 2009-2010

STUDENT - Last Name _____ First Name _____ Date of Birth (mo/day/yr) ____/____/____

PARENT / GUARDIAN - Last Name _____ First Name _____ Relationship _____

Mailing Address _____ City _____ State _____ Zip Code _____

Telephone: Home _____ Work _____ Cellular _____ Other(s) _____

Email Address(es) _____ *Tuition Statements will be emailed to this address UNLESS HMA IS NOTIFIED OTHERWISE

Name of School Currently Attending (for promotional purposes, i.e., Student Achievement Announcements) _____

LIST COMMENTS FOR HMA BELOW:

I understand and comply to the policy statements defined in the Hamlin Music Academy Policy Statement 2009-2010

Adult Student or Parent/Guardian SIGNATURE _____ Date _____

Instrument: _____ Instructor: _____ Day / Time: _____ Start Date: _____

Instrument: _____ Instructor: _____ Day / Time: _____ Start Date: _____