



LEXINGTON COMMUNITY EDUCATION

146 Maple Street, Lexington, MA 02420

Office 781 862 8043 Fax 781 863 5829

Music Instrument And Voice Lessons

FALL/WINTER 2018-2019 REGISTRATION

Registration is **REQUIRED** of new and returning students. Please complete (in ink) and return this form to begin the process of matching you or your child with a teacher, location and schedule. Upon receipt, teachers will contact parents in the order in which registrations are received to arrange a lesson time. Please include your payment in full with this application. *Payment will not be processed until LCE is notified that a lesson schedule has been arranged between you and your teacher.* If you are a **RETURNING STUDENT**, please contact your teacher directly to set up a start time for lessons.

Student Name: _____

Parent/Guardian Name: _____

Address: _____

Town: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: (please print) _____ Best way to contact: _____

Instrument: _____ Teacher: _____

Preferred Day of Week: _____ Preferred Lesson Time: _____

LCE USE ONLY

Rcvd _____

Into FMP _____

Teach Conf _____

Check # _____

The following instruments are available for individual study: Baritone Horn (Euphonium), Bass, Bassoon, Cello, Clarinet, Electric and Acoustic Guitar, Flute, French Horn, Guitar, Oboe, Percussion (Drums), Piano, Saxophone, Sitar, Trombone, Trumpet, Tuba, Upright Bass, Viola and Violin. Voice lessons are also available.

Length of semester depends on day of the week of the lessons as noted below. Each student is permitted only one personal excused absence per semester and is urged to give the teacher 24 hours notice when possible. The only other approved reason for a missed or cancelled lesson is school cancellation, teacher absence, or conflict with a required school event.

I acknowledge my responsibility for the prompt pre-payment of all tuition charges, and I understand the attendance policy.

Signature of Parent/Guardian: _____ Date: _____

| Mark Preferred Session and Day | Length of Session | Cost of ONE Lesson | # Sessions | Total Tuition |
|--------------------------------|-------------------|--------------------|------------|---------------|
| | 30 minutes | \$30.00 | | |
| | 45 minutes | \$45.00 | | |
| | 60 minutes | \$60.00 | | |

Monday – 13 lessons Tuesday – 15 lessons Wednesday – 16 lessons Thursday – 16 lessons Friday – 17 lessons Saturday – 17 lessons

Annual registration fee

(per school year, September through June): First child is \$30 and additional family members are \$20 each.

\$ _____

Total payment enclosed:

\$ _____

Please make your check out to LEXINGTON COMMUNITY EDUCATION for full amount.

OR, give us your credit card information below. Thank you.

Please charge the following credit card:

VISA MASTERCARD Amount to Charge: \$ _____

Account Number

V Code

Signature: _____ Expiration Date ____/____/____

V code is the last 3 digits of the number above your signature on the back of the card.

Month Year