



Enrollment Form - Guitar

Student's Name _____ Date of Birth: / /

Parent's Name _____
 (if student is a child)

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Cell Phone _____

Work Phone _____

E-mail address _____

Briefly describe any previous experience you've had with guitar. _____

How did you hear about Keys to Harmony? _____

By signing this form, I acknowledge that I have read and understand the policies of Keys to Harmony, LLC and agree to the terms specified therein.

 Signature Date

OFFICE USE:

Class info	Start Date: _____ Class: _____
	Teacher: _____ <input type="checkbox"/> Private: Weekly or Biweekly
Studio Director	<input type="checkbox"/> Verify online registration is complete <input type="checkbox"/> Send Welcome E-mail on _____ <input type="checkbox"/> Student tag set to: Current Guitar Student
	<input type="checkbox"/> Charges: ____ X RegRate / EnrollFee <input type="checkbox"/> Discounts: ____ X FamDisc
	<input type="checkbox"/> Add new class if needed