

Piano Play Music Systems, Inc.
 14237 Ventura Blvd.
 Sherman Oaks, CA 91423
 Phone: (818)789-6110
 Facsimile : (818)789-6167
 Web: www.pianoplaymusic.com



Office
 Initials _____
 Posted in roster
 Date ____/____/____

SUMMER STUDENT ENROLLMENT FORM

Date Rec'd ____/____/____ Faxed Emailed Walk-in Sherman Oaks Woodland Hills Pasadena Revised 04//13/11

1 STUDENT INFORMATION CURRENT PROGRAM (check one)

Student's Last Name		First	Middle	<input type="checkbox"/> LH <input type="checkbox"/> MT <input type="checkbox"/> RR <input type="checkbox"/> LM	<input type="checkbox"/> Private Student	Level <input type="checkbox"/> Prep <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Day _____ Time _____ Alt. Day _____ Time _____
Guardian / Parent	Guardian/ Parent		Cell Phone No. ()	Student Birthday / /	Age	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Home Address		City	State	Zip Code	Home Phone No. ()	
Billing Info	Address		City	State	Zip Code	
Work Phone No. ()	Email Address			Fax Number ()		
How did you hear about us? (Please check all that apply)			Attended Open House? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 1 st Visit <input type="checkbox"/> Returning	
<input type="checkbox"/> Family	<input type="checkbox"/> Friend	<input type="checkbox"/> Close to Home/Work	<input type="checkbox"/> Yellow Pages	<input type="checkbox"/> Internet	<input type="checkbox"/> Other	

Do you have other family members here? If yes, who? _____

(PLEASE READ THIS SECTION FULLY)

I/ We request **Piano Play** to reserve a place for _____ for the summer and agree to pay the tuition (which includes materials). **There are No REFUNDS on tuition. I have read & understood. Please initial here _____.**

Payments can be made either by Check/Money Orders, Credit Card or Cash. Checks/Money orders should be made payable to: **Piano Play**. Credit Cards accepted include: **American Express, Discover, Master Card and Visa.**

Tuition Fees (please check one) (includes materials)	\$	GROUP <input type="checkbox"/> LH (\$18.50 per class) <input type="checkbox"/> (\$90 for 5 weeks for 45 mins) <input type="checkbox"/> MT <input type="checkbox"/> RR <input type="checkbox"/> LM (\$24.00 per class) <input type="checkbox"/> (\$117.50 for 5 wks for 60 mins) PRIVATE <input type="checkbox"/> 30- min- \$33.00 <input type="checkbox"/> 45- min- \$45.00 <input type="checkbox"/> 60- min- \$56.25 <input type="checkbox"/> [Adv. Students only] 75- min - \$77.00
Total Amount Paid (please check all that apply)	\$	

X _____
PARENT/GUARDIAN SIGNATURE
DATE

Credit Card Information	<input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa	Card No.	Expiration: /
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