



## Singing Hearts Music Registration Form

<b>Caregiver's full name</b>	
<b>Child's full name</b>	
<b>Child's birthdate</b>	
<b>Class Name</b>	
<b>Class Time Choice #1</b>	
<b>Class Time Choice #2</b>	
<b>Address</b>	
<b>City, Zip</b>	
<b>Day Phone/Messages</b>	
<b>*Cell Phone/Emergency #</b>	
<b>Email address</b>	
<b>(for Studio Only) Class Costs:</b>	
<b>How did you learn about Singing Hearts Music?</b>	<input type="radio"/> Friend <input type="radio"/> Parent Map Ad <input type="radio"/> Internet search for music classes <input type="radio"/> Seattle's Child Ad _____ Other

\*required

**Please accept my deposit of \$50 (\$20 non-refundable) or payment of \$\_\_\_\_\_ for fall/winter 09 classes and I'll pay the remaining balance in full by week 3 of class or in two equal payments by week 3 and week 7 of class.**

**If joining late: prorated tuition calculated appropriately excluding materials fee.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

(Please fill out separate forms for each child enrolled.)