

The Music Center
149 Maine Street
Brunswick ME 04011
207-725-6161
www.themusiccenter.net

REGISTRATION FORM for Private Lessons

Student(s)	Appointment(s) Reserved:
	day time instructor
_____	___ / ___ / ___
_____	___ / ___ / ___
_____	___ / ___ / ___

of half-hour slots reserved : _____
current tuition per slot : _____
TOTAL MONTHLY TUITION : _____

Credit / Debit Card: _____ / _____ / _____ / _____ **exp.** _____ / _____

- I. I have read, understand, and agree to all of the Music Center's lesson policies (*sep. sheet*)
- II. I hereby authorize The Music Center to automatically charge the above card my TOTAL MONTHLY TUITION the first week of each month.
- III. I authorize a four-percent cost-of-living increase to this amount each September.
- IV. In the event of a declined charge, I agree to pay tuition owed plus a \$35 processing fee.
- V. I agree to provide 15 days notice to discontinue payment
My final month's tuition may be prorated if notice is given.

SIGNATURE _____ **today's date** _____

Contact Information:
Print Name(s) _____
Phone(s) _____
Mailing Address _____
_____ email _____

*Beginning in the middle of a month?
You may prorate your first month's tuition
by pre-paying at the time of registration.*

*start date:
weeks remaining:
paid at registration: \$_____*