



# Kids Music Room

## CLASS REGISTRATION: 3'S & 4'S CLASS

Today's Date:		<b>Class Location:</b> Kingdom Kids Preschool- Crossroad UMC		<b>Thursday Class</b> 12:45-1:30 p.m.	
<b>STUDENT INFORMATION</b>					
Student's last name:		First:	Age:	Birthdate:	
Address:			Zip:		
Parent's Name:		Home phone #:	Cell phone #:		
<b>CLASS REGISTRATION</b>					
<input type="checkbox"/> <b>Session B:</b> Music of the Seasons Adventure <b>Cost: \$70</b> Oct. 23- Dec. 4, 2014  Total Enclosed: \$ _____ _____ check # _____ cash		<p><b><u>COST:</u></b> \$70 per session (6 / 45 min classes) payable <b><u>Kids Music Room</u></b></p> <p><b><u>Payment:</u></b> cash or check</p> <p style="text-align: center;"><b><u>Class size limit: 10 students</u></b></p> <p style="text-align: center;"><b>CLASSES MEET EVERY THURSDAY FROM 12:45-1:30 P.M.</b></p>			
<b>FOR OFFICE USE ONLY</b>					
<p>Could Anne Dix and Kids Music Room, LLC use photos/videos of your child(ren) making music class for marketing purposes on the website <a href="http://www.kidsmusicroom.com">www.kidsmusicroom.com</a>? Names will not be published.</p> <p>I hereby waive, release, and forever discharge all claims against Anne Dix and Kids Music Room, LLC, for any injuries, damages, losses or claims, whether known or unknown, which arise during or result from any activity of or services provided by her and it.</p>					
<p>I understand that any missed classes cannot be made up. I understand that my child <b><u>MUST</u></b> be picked up and signed out promptly at 1:30 p.m.          I have read and agree to the permission form above.</p>					
_____ Patient/Guardian signature				_____ Date	