

STUDENT Name

PARENT/GUARDIAN

Employer____

PRIVATE LESSONS*

Instrument

CAMP/CLASS/WORKSHOP

Employer__

SUMMER 2018 Registration Form

Office Use Only		
Account #		
Method of Payment:	☐ Visa/MasterCard/Disc./Amer. Express	
	□ Check #	
Date Received	Amount	
Order	Clerk	

Register online at www.musicschoolofdelaware.org, or return this form and payment, including \$20 summer processing fee (after May 1), tuition and materials fees, to the branch at which your lessons/camps/classes/workshops will be held. ☐ Milford Branch 23 North Walnut St., Milford, DE 19963 • (302) 422-2043 | (302) 422-3340 (fax) □ Wilmington Branch 4101 Washington St., Wilmington DE 19802 • (302) 762-1132 | (302) 762-3422 (fax) ☐ **Hockessin** (see Wilmington Branch) Street Address PERSON RESPONSIBLE FOR PAYMENT City____ Name State ZIP Street Address Home Phone_____Cell Phone____ Birth Date_____Grade in Sept.____ ____ZIP_____ State Phone____ Known Allergies_____ □ Work Phone (Please check your preferred contact method) ☐ Cell Phone____ □ Email Father/Guardian Name □ Work Phone (Please check your preferred contact method) ☐ Cell Phone **INSTRUMENT DATES** TIME **TUITION/FEES** Instructor Days available: ☐ Mon. ☐ Tues. ☐ Wed. ☐ Thurs. ☐ Fri. Instrument Introduction Program? Lesson length: □ 30 minutes □ 45 minutes □ 60 minutes Weeks available: □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 (Refer to calendar on page 2 and mark which weeks you are available) *CURRENT STUDENTS: before registering, please check with your instructor to confirm that he/she will be teaching in the summer. I hereby give The Music School of Delaware and their legal representatives and assigns the right and permission to publish, without charge, any photographs/

PHOTO RELEASE

Times available

images of the above-named student taken at The Music School of Delaware or at off-site Music School functions. I release all claims with respect to copyright ownership and publications including any claim for compensation related to use of the materials. Photos/images may be used a current or future year in print, electronic or video format, including but not limited to newsletters, brochures, flyers, press releases, advertising, the annual information guide, the school's website and Facebook page, and other promotional materials.

- ☐ I give permission for the Music School to use the above-named student's photo/image.
- □ I DO NOT give permission for the Music School to use the above-named student's photo/image.

ADDITIONAL INFORMATION—To help us better serve our community, please answer the following questions. This information is voluntary.

Does this student have any special needs or disabilities? ☐ No

- What is the student's race/ethnic background?
- ☐ African-American □ Caucasian ☐ Asian

☐ Other (please specify):__

- Native American ☐ Hispanic/Latino ☐ Pacific Islander
- ☐ Yes (please specify):_
 - How did you learn about the Music School?
 - - ☐ Friend/Family ☐ Radio/Television
- ☐ Already enrolled ☐ Print Advertisement
 - ☐ Print Article/Feature
 - ☐ Other (please specify):___
- ☐ Music School publication ☐ Music School website

By signing this form, I have read and agree to the conditions and policies at http://musicschoolofdelaware.org/summer-policies.

Signature_

FAMILY & FRIENDS

The Music School hosts many special music events that may be of interest to grandparents or other family and friends. Please complete this form so that we can notify them of upcoming events. Thank you for your assistance!

Name of Grandparent #2 ifree Address City	The Music School of Delaware Piano Competition The Music School of Delaware Piano Competition and Person Responsible for Payment sections on the front of this form until the reportation of the Story Responsible for Payment Piano Institute participants). No Stores and Person Responsible for Payment Piano Institute participants). No Stores and Person Responsible for Payment Piano Institute participants). No Stores Responsible for Payment sections on the front of this form until the remainder of the details below. Please submit the SSO application few with this form (waived for Summer Piano Institute participants). No Storessing fee is necessary for contestants registering for the competition alone. Contestant Name Contestant Email Phone Sy signing this form, I agree that I have read and understand the information and rules of the Piano Competition a cultified pain. I understand contestants selected as first place winners are required to perform in the moster class at the end of the competition as auditined contestants. Place of the Piano Competition as auditined contestants are acquired to perform in the moster class at the end of the competition on Tuesday, July 17, 2018.			
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