



Enriching the musical life and culture of children

107 Gifford Avenue
Jersey City, NJ 07304
201-433-0880 (o)
201-433-3967 (f)
mymusicgarden@gmail.com
www.mymusicgarden.com

REGISTRATION FORM

PLEASE READ LESSON POLICY AND FEE SCHEDULE, FILL ONE FORM OUT FOR EACH CHILD, SIGN AND DATE BELOW, AND THEN FAX TO 201-433-3967 OR MAIL TO MY MUSIC GARDEN, 107 GIFFORD AVENUE, JERSEY CITY, NJ 07304. YOU WILL RECEIVE AN EMAIL WITH THE INVOICE, WHICH YOU MAY PAY BY CHECK OR USING PAYPAL.

Child's Name _____ Date of Birth _____ Grade _____

Parent #1 Name _____ Home Phone _____

Address _____

Email Address _____ Cell Phone _____

Parent #2 Name _____ Home Phone _____

Address _____

Email Address _____ Cell Phone _____

List instrument(s) your child has studied and length of study: 1) _____

2) _____ 3) _____

Describe your child, including strengths, challenges, learning styles, musical experiences, tastes, etc. (use the back of the form if necessary)

My child is interested in: Piano Lessons Violin Lessons Other (specify) _____

Day/Time & Location Preferences:

1) _____ 2) _____ 3) _____

I have read and understood "My Music Garden Lesson Policy" and "My Music Garden Fee Schedule" and I agree to the terms and conditions.

Parent Signature: _____ Date: _____