



## **REGISTRATION FORM**

### **ERMS Academic Year 2016 - 2017**

Registering for: (please circle)

**Piano Voice Both**

**30 minute 45 minute 60 minute**

<b>Student Name</b>	<b>Age (mm/dd/yyyy)</b>
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**Parent / Guardian Name**

<b>Mailing Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
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**E-mail Address** Tuition Statements will be emailed to this address UNLESS NOTIFIED OTHERWISE

<b>Telephone:</b>	Home	Cell	work
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Grade & Name of School Currently Attending:

<b>Years Studied</b>	Piano	Voice	Other
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Festival Participant?

MMTA Contest, Exams, Music Bridges Participant?

Methods used? (e.g. Faber, Bastien, Alfred, Noona, etc.)

Goals for your musical study:

**I understand and agree to comply with the policy statements defined in the ERMS Policy Statement and Agreement**

Adult Student or Parent / Guardian SIGNATURE Date

