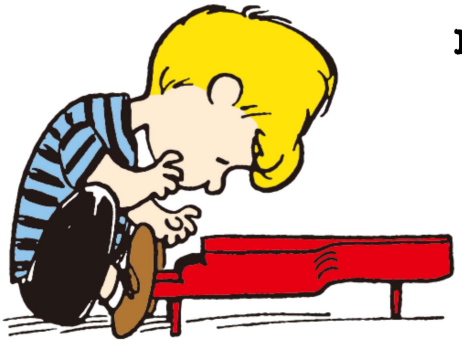
Registration for After School Music Lessons



Mr. Cotroneo Music Director/Instructor

PIANO/GUITAR/VOICE/DRUMS/BASS

@ St. John's Lutheran School GYM

663 Manor Road SI NY

Contact Mr Cotroneo for availability

Student Name_____ Age_____ Birthday_____

Parent Name_____

Address_____

Primary Phone Number For Communication **With Text**_____

Emergency Contact_____

Confidential Information

Medical Conditions or Medications You Feel the Teacher Should Be Aware Of

_____

All information above will be held in strict confidence and is for the sole protection of the student, parent, and shall only be used in the event of an emergency, or for the evaluation of the students special needs for learning skills. This information will not be duplicated, or shared. Any changes in the above information will not be duplicated, or shared. Any changes in the above information should be updated and will remain the responsibility of the student or guardian to keep the above information updated.

Music

Musical Background of Student_____
Place an "X" for your primary lesson, and place a checkmark for areas of interest:

Private Lessons
__Classic Piano Lessons (Circle: Beginning, Intermediate, & Advanced)
__Acoustic Guitar (Circle: Beginning, Intermediate)
__Ukulele (Circle: Beginning, Intermediate)
__Bass Guitar (Circle: Beginning, Intermediate)
__Drums & Drum Kit (Circle: Beginning, Intermediate, Advanced)
__Voice (Circle: Beginning, Intermediate, Advanced)

Group Lessons
__Group Lesson: __Piano __Guitar __Ukulele __Other

I hereby state that the above information is true and correct. I agree that I have received, read, and understand the lesson policy for all terms and conditions including giving a month's notice in taking a break or ending lessons. I give permission to Joey Cotroneo Music Instructor to use video and pictures of the student for business promotion. I also agree that I will keep the above information updated as required.

Signed_____**Date**_____