



## SUMMER MUSIC READINESS Registration Form\*

\*Note: For Instrumental, Voice, and Piano classes, please use the Private and Group Registration Form

**Please Print Clearly:**

Today's Date \_\_\_\_\_

Semester: SUMMER 2018

Name of Student 1:		Birthday __/__/__	Age:
Sex: M / F	Grade:	School:	
Describe any special conditions that we should be aware of: _____			
_____			

Name of Student 2:		Birthday __/__/__	Age:
Sex: M / F	Grade:	School:	
Describe any special conditions that we should be aware of: _____			
_____			

### Contact Information: \*Returning students – indicate any changes

Primary Care-giving Parent:		Relationship:	
Other Parent:		Relationship:	
Student Address:			
City/State/Zip Code:			
Home Phone:		Work Phone:	Cell:
Billing Address (if different from above):			
City/State/Zip Code:			
Email 1:		Email 2:	
How did you hear about us?		Saw Ad / Banner / Flyer / Church Member / Word of Mouth	

### Emergency Contact: (besides parents)

Name			
Relationship to Student			
Home Phone		Wk/Cell	

**Please continue to next page.**

For Office Use only - Start date:    /    /    Prorate wk \_\_\_\_ / \_\_\_\_

**1. Select Class**

**2. Select Number of Lessons**

**3. Classes Student Will Attend**

<input type="checkbox"/> <b>Prenatal, Babies, Toddlers</b> Infant – 3.5 years old Wednesdays, 6:00-6:30 p.m. Student must be accompanied by a parent or guardian. Name of adult accompanying child (required): _____	<input type="checkbox"/> <b>6 Classes:</b> \$125* <input type="checkbox"/> <b>8 classes:</b> \$155*	<input type="checkbox"/> May 23 <input type="checkbox"/> June 13 <input type="checkbox"/> July 11 <input type="checkbox"/> May 30 <input type="checkbox"/> June 20 <input type="checkbox"/> July 18 <input type="checkbox"/> June 6 <input type="checkbox"/> June 27
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<input type="checkbox"/> <b>Prenatal, Babies, Toddlers</b> Infant – 3.5 years old Thursdays, 9:15-9:45 a.m. Student must be accompanied by a parent or guardian. Name of adult accompanying child (required): _____	<input type="checkbox"/> <b>6 Classes:</b> \$125* <input type="checkbox"/> <b>8 classes:</b> \$155*	<input type="checkbox"/> May 24 <input type="checkbox"/> June 14 <input type="checkbox"/> July 5 <input type="checkbox"/> May 31 <input type="checkbox"/> June 21 <input type="checkbox"/> July 19 <input type="checkbox"/> June 7 <input type="checkbox"/> June 28
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<input type="checkbox"/> <b>Level 1</b> 3.5- 4 years old Thursdays, 2:30-3:15 p.m. Parent or guardian may attend the last 15 minutes of class to participate in group activities.	<input type="checkbox"/> <b>6 Classes:</b> \$150 <input type="checkbox"/> <b>8 classes:</b> \$190	<input type="checkbox"/> May 24 <input type="checkbox"/> June 14 <input type="checkbox"/> July 5 <input type="checkbox"/> May 31 <input type="checkbox"/> June 21 <input type="checkbox"/> July 19 <input type="checkbox"/> June 7 <input type="checkbox"/> June 28
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<input type="checkbox"/> <b>Level 2 &amp; 3</b> 5-7 years old Thursdays, 4-5 p.m. Parent or guardian may attend the last 15 minutes of class to participate in group activities.	<input type="checkbox"/> <b>6 Classes:</b> \$175 <input type="checkbox"/> <b>8 classes:</b> \$220	<input type="checkbox"/> May 24 <input type="checkbox"/> June 14 <input type="checkbox"/> July 5 <input type="checkbox"/> May 31 <input type="checkbox"/> June 21 <input type="checkbox"/> July 19 <input type="checkbox"/> June 7 <input type="checkbox"/> June 28
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\*An additional \$40 material fee will be charged to NEW Prenatal/Baby/Toddler students

All Classes use the **Musikgarten™** curriculum. Visit [www.musikgarten.org](http://www.musikgarten.org) for more curriculum information.

**Amount Paid**

Check # or CC _____	\$ _____
Check # or CC _____	\$ _____

Payment is due at the time of registration to insure a spot. Installment plans and scholarships are available by written request to the registrar. Email [Registrar@sapch.org](mailto:Registrar@sapch.org) to request a scholarship application. Make checks payable to **St. Andrew's SOFA** and write **Name of student** in the memo. Do not send cash through the mail. **Return completed registration form and payment to: St. Andrew's SOFA, 5308 Buffalo Speedway, Houston, TX 77005.**

**Agreement and Signature**

I have read and understood the school policies. I understand that there are no refunds unless a class is cancelled due to insufficient enrollment. I give permission for my child's picture to be used in SOFA publicity, either in print or on the web. Requests for exclusion must be made in writing. The school policy can be found at [www.sasofa.org](http://www.sasofa.org).

Name of Parent (printed)	Signature
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**Phone: 713.667.1703 ext. 208 | Email: [Registrar@sapch.org](mailto:Registrar@sapch.org) | Website: [www.sasofa.org](http://www.sasofa.org)**