



Magnolia Violin Academy

Carey Rasmussen: Instructor

New Student Registration ~ Fall 2011

Student's Name: _____

DOB: _____ Gender: M F

Book Level: Beg. ___ 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ 9 ___ 10 ___

Parent(s) Name(s): _____

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone #1: _____ Cell Phone #2: _____

Primary Email: _____

Best method to reach me: Home Cell #1 Cell #2 Work Email

Lesson Length: 30 minutes 45 minutes

Preferred Lesson Day & Time:

1st Choice: _____ 2nd Choice: _____

3rd Choice: _____ 4th Choice: _____

Parent Class: _____ need to take it _____ taken already

Fall Semester Lessons will be taught during the following times (tentative):

Mondays 4pm-6:30pm, Tuesdays 4-6:30pm, Wednesdays 4pm-6:30pm.

Please note that Group Classes will be scheduled for two Saturdays each month at 10 am.

Instructor Use Only

Tuition Amount Paid: \$ _____ Method: _____ Date Received: _____