

Music With Me

Class Only

Caregivers attend class with the children

**Music With Me
1039 Oakwood Trail
Indianapolis, IN 46260**

**Juliette M. Nehring - Director
317-202-0232
msjuliettemusic@gmail.com**

Revised 1/16

Enrollment

Summer 4 weeks _____ Fall 17 wks _____ Spring 17 wks _____

Child's Name: _____

(first)

(middle)

(last)

Age(as of August 1, 2015): _____ years _____ months; Birth date: _____

First names and ages of siblings: _____

Parents or guardians: _____

Home phone: _____ Business/Cell phones: _____

Address: _____

City: _____ State: _____ Zip code: _____

e-mails: _____

Emergency contact: _____ Best phone: _____

Adults authorized to pick up child (picture id must be on file with us): _____

How did you hear about our program? _____

Is there anything else you would like us to know about your child? _____

**We would love for you to contribute your story to our Music With Me musical heritage project (Seeds of Common Sound).
Please tell us about musical heritage in your family:**

1. What music did you play for your children when they were very young? _____

2. What music have you taught them about that is important to you? _____

3. What important musical memories do you have from someone at least a generation older than you (parents, grandparents, aunt/uncle, teacher)? _____

4. Name two or more songs you have taught your children that you learned from someone at least a generation older than you (parents, grandparents, aunt/uncle, teacher). _____

5. Are there any family or friends who are musicians and might like to share with a class? _____

Payment

Your child's name will be added to the roster upon receipt of a completed registration form and first payment. There is a non-refundable registration/materials fee for each child. Tuition is charged by the session.

An optional payment plan for fall and spring tuitions may be arranged by an agreement of 4 equal payments. Please confirm arrangements and dollar amounts with Ms. Juliette.

Fall

Due Dates
 Payment 1 first week
 Payment 2 October 1
 Payment 3 November 1
 Payment 4 December 1

Spring

Due Dates
 Payment 1 first week
 Payment 2 March 1
 Payment 3 April 1
 Payment 4 May 1

This payment schedule in no way implies a 'month-to-month' arrangement. The family makes a financial commitment for the entire session upon registration.

An "early bird" discount of \$20 is applicable to tuition paid in full by two weeks before the first day of class.

There is a \$30 fee for returned checks.

Please make checks payable to Juliette Nehring.

Attendance

Refunds will not be given for absences.

Monday	10:00 – 11:00	\$15 _____
Wednesday	10:00 – 11:00	\$15 _____
Friday	10:00 – 11:00	\$15 _____

Sub-Total \$ _____
X

Fall	15 classes	_____
Spring	15 classes	_____
Summer	4 classes	_____

+
 Registration/Materials fee \$35 _____

Total \$ _____

I/We agree to the terms of this contract.

Parent/Guardian _____ **Date** _____