

Home of Fine Arts Connection Incorporated

Registration Form

Date _____

Parent Name _____

Mailing Address _____

Home Phone _____

Cell Phone _____

Email Address _____

Best time to call _____

Student 1 _____

Instrument(s) _____

Age _____

Grade _____

Class 1 _____

Class 2 _____

Class 3 _____

Class 4 _____

Student 2 _____

Instrument(s) _____

Age _____

Grade _____

Class 1 _____

Class 2 _____

Class 3 _____

Class 4 _____

Student 3 _____

Instrument(s) _____

Age _____

Grade _____

Class 1 _____

Class 2 _____

Class 3 _____

Class 4 _____

Student 4 _____

Instrument(s) _____

Age _____

Grade _____

Class 1 _____

Class 2 _____

Class 3 _____

Class 4 _____

FOR OFFICE USE ONLY
REGISTRATION COMMITMENT DECLARATION OF INTENT