

Early Childhood Music® Application

~Please Print~

Name of Student _____ Home Phone _____

Address _____

P.O. Box/ Street Address _____ City _____ State _____ Zip _____

Age _____ Birth Date _____ Grade in School as of September 1 _____ Male () Female ()

Father's Name _____ Work/Cell Phone _____

Mother's Name _____ Work/Cell Phone _____

E-mail address _____

Person Responsible For Account: (If other than parent listed above.)

Name _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ Relationship _____

E-mail address _____

Account Setup:

Automatic charge to debit card or credit card. Visa, MasterCard and Discover accepted. **Requires Payment Security Form.**

One Year Advance Tuition / Material Payment. May mail annual check to the office. **Requires Payment Security Form**

Student's Medical History:

Are there any medical problems, learning difficulties, allergies, etc. that we should know about?

I understand that...

- Once enrolled a time slot is reserved just for me. I am an on-going student and responsible for monthly tuition through my written termination notice, regardless of whether I attend the lessons or not.
- Application fee and tuition will not be refunded for any reason.
- Should I need to terminate, I understand that one full calendar month written notice must be given. Written notice (with a signature) must be submitted to the office before the first day of the calendar month of which termination will occur. Monthly tuition is not prorated, and termination must occur at the end of a calendar month. Failure to follow this procedure will result in my being charged an additional month's fees.

Date

Responsible Party's Signature

Teacher _____	Class & Time _____	Rate _____	Start Date _____		
Application fee: Single _____	Family _____	QBP _____	MT _____	R _____	School Location _____

Early Childhood Music® is an extension of Perfect Praise, Inc.

P.O. Box 18008 Huntsville, AL 35804

www.earlychildhoodmusic.net

www.prenatalmusic.net