



2017/2018 Registration Form

Date: _____

Time: _____

Please start the registration process by printing and filling out this form. You can either mail it to us at 317 Main Community Music Center, 317 Main Street, Yarmouth, ME 04096 or drop by in person. **Note that you/your child are not registered until your registration preferences are confirmed through our front desk. Once we receive your application, we will contact you as soon as possible.** Scheduling preferences are given to students who commit to the full session and pay before the registration deadline.

Name: _____ M ___ F ___

Student Birthdate: _____

Contact Info (Filled out by parent if student is a minor)

Name: _____

Email: _____

Preferred Phone: _____ Alternate Phone: _____

Street: _____ City: _____

State: _____ Zip: _____

Preferred means of contact Cell: _____ Home Phone: _____ Email: _____

How did you hear about 317 Main?

Instrument: _____ Experience: _____

Preferred Instructor: _____

Preferred Day(s): _____

Preferred Time(s): _____

Lesson Type (13 week Session):

Private 45 min. _____ Private 30 min. _____

Semi-private 45 min. ____ (2 same level students brought by you)
Group/Ensemble ____ Name of Group _____
Little Roots/Deep Roots _____

[Tuition Rate Information](#)
[Financial Aid Information](#)

I give permission to use photos of me/my child for promotional purposes Yes ____ No ____

I have read the policies and procedures and agree to 317 Main's payment procedures and cancellation policy. Yes ____ No ____

I would like to be contacted about volunteering to help at 317 Main events including concerts, recitals, HenryFest. Yes ____ No ____

I would like to make a tax deductible donation with my tuition payment to support programming at 317 Main in the amount of \$10 ____ \$25 ____ \$50 ____ \$100 ____ Thank You!

-----**FOR OFFICE USE ONLY**-----

Tuition Calculator
Tuition \$ _____

Annual Registration Fee \$ _____ Payment Plan Fee (\$20) _____

Total Due: \$ _____

For Office: Date Received _____ Cash/CC/Check # _____

Annual Reg Fee: \$25/student \$40/family

Name: _____ (signifies signature) Date: _____

Notes: