

NAME OF STUDENT _____
BIRTHDATE _____
GRADE _____
INSTRUMENT _____

CLASS PREFERENCE: (RANK 1-2)
SAT MORNING / EVENING (BOLINGBROOK LOCATION ONLY) _____ SUN AFT _____

New Students Only: (or changes for returning students)
ADDRESS _____ CITY _____
ZIP _____

PARENT PHONE(S) _____
STUDENT PHONE _____

PARENT NAMES: Mother _____
Father _____

PARENT EMAIL
(REQUIRED) _____

STUDENT EMAIL
(OPTIONAL) _____

HOW LONG HAS STUDENT BEEN PLAYING INSTRUMENT

DOES STUDENT PLAY ANY ADDITIONAL INSTRUMENTS OR SING?

ESTIMATED LEVEL (circle one) BEGINNING INTERMEDIATE
ADVANCED NOT SURE

NAME/PHONE CONTACT OF STUDENT'S PRIVATE
TEACHER _____

EMERGENCY CONTACT (OTHER THAN PHONE #S ABOVE):
NAME _____
RELATIONSHIP _____
PHONE #1 _____ PHONE #2 _____

All Students:

The undersigned gives permission to the above named student to participate in Rock College Inc. classes and releases Rock College Inc., its officers, employees and agents from any liability whatsoever for any injury or death to person or loss or damage to property sustained by the undersigned or any member of their family in attendance, and the undersigned agrees to defend and indemnify Rock College, its officers, employees, and agents, of any liability or loss they might sustain by reason thereof.

Cancellations: a full refund will be issued up to 7 days prior to class start date. If a cancellation is received 6 days prior to class start date or later, a \$50 fee will be assessed. ** Absolutely NO REFUNDS given after start of first practice ** Must be signed in front of a Rock College employee or must be notarized if signed of site.

Signature of Parent or Guardian

Cost: \$200 per eight-week session. Payment can be made in one or two installments. A minimum of \$100 deposit is required at time of application. Second installment is due by first practice of the session. Students must be paid in full to be eligible to play in the final concert.