

Kindermusik at the **Burch School of Music**

Fall 2019 REGISTRATION SHEET

(Please complete one sheet per child)

Student Name _____ Telephone _____

Parent Name _____ Email Address: _____

DEADLINE FOR ENROLLMENT: August 2, 2019

Please enroll my child in the following Kindermusik Class at the Burch School of Music:
(if you are available for more than one section, please indicate 1st, 2nd, 3rd choices)

____ **Village/Feathers & Do-Si-Do** (0 – 1.5 yrs.) on Thursdays from 8:30-9:15 a.m.

____ **Our Time/Wiggles and Giggles** (1.5 – 3 yrs.) on Wednesdays from 9:00-9:45 a.m.

____ **Our Time/Wiggles and Giggles** (1.5 – 3 yrs.) on Thursdays from 9:30-10:15 p.m.

____ **Our Time/Wiggles and Giggles** (1.5 – 3 yrs.) on Fridays from 9:00-9:45 a.m.

____ **Imagine That!/See What I Saw** (3 – 4 yrs.) on Tuesdays from 1:45-2:30 p.m.

____ **Imagine That!/See What I Saw** (3 – 4 yrs.) on Thursdays from 10:30-11:15 a.m.

____ **Young Child Semester I** (4 – 7 yrs.) on Mondays from 4:15- 5:15 p.m.

____ **Young Child Semester I** (4 – 7 yrs.) on Thursdays from 2:00-3:00 p.m.

____ **Young Child Semester III** (4 – 7 yrs.) on Tuesdays 4:15-5:15 p.m.

Classes must have at least **five** students in order to be offered. Other times may be available upon request, so please let me know if your child has conflicts with these times and needs a different schedule.

YES! I wish to enroll my child for the entire academic year. S/he will be enrolled in the following class in the Spring semester: _____ for a total tuition cost of \$_____ (Full tuition due by Aug 26)

Signature of Parent or Guardian

Phone

Date

Please return this page, plus tuition check **BY AUGUST 2** to:

THE BURCH SCHOOL OF MUSIC - PO BOX 2345 - WEATHERFORD, TX. - 76086

KINDERMUSIK DATA SHEET

CHILD'S NAME: _____

PARENTS' NAMES: _____

ADDRESS: _____

City

State

Zip

PHONE: _____

Home

Mom Cell

Dad Cell

Work

E MAIL ADDRESS: _____

CHILD'S BIRTHDATE __/__/__ FOOD ALLERGIES: _____

SIBLINGS' NAMES AND AGES: _____

If your child has special needs, please let us know. We would like to serve you and your family to the best of our abilities, and it is very important to understand the children we teach. This information would be held in strictest confidence: _____

Please help us with marketing by letting us know how you heard about KINDERMUSIK at THE BURCH SCHOOL?

- _____ Kindermusik Web Site
- _____ Burch School Web Site
- _____ Burch School Facebook Page
- _____ The Schoolhouse
- _____ Newspaper (Which: _____)
- _____ Word of mouth (Who: _____)
- _____ Other: _____

BRING A FRIEND DISCOUNT:

(\$20 off tuition for every new family recruited to Kindermusik...up to four families for a total of \$80 off)

I am new to the Burch School and was recruited by: _____

I am returning to the Burch School and have recruited: _____
