



Moira Buck, B.Ed., ECS Diploma, U.M.T., MTNA
Music is Marvelous Piano Studio

A Royal Conservatory of Music Gold Medal Winning Studio

9 Lowe Avenue, Fort Saskatchewan, AB Canada T8L 2K9

Phone: 780-998-3005

Fax: 780-998-2035

E-mail: musicismarvelouspiano@gmail.com

Cell: 780.964.7607 [For Texting]

Web Page: www.musicismarvelouspiano.com

Facebook: Music Is Marvelous Piano Studio

Twitter: @musicsmarpiano

REGISTRATION FORM *Registration and re-registration of students is at the discretion of the teacher*

YES, I would like to enroll my child[ren] or myself in lessons at Music Is Marvelous Piano Studio. **I HAVE READ, AGREED TO, COMPLETED, RETURNED, and SIGNED:** (1) the REGISTRATION FORM, (2) the PERSONAL CONSENT & RELEASE Form, and (3) the MEDIA CONSENT & RELEASE form associated with MUSIC IS MARVELOUS PIANO STUDIO.

Date: _____

 (Parent/Guardian or Adult Student Name/Signature)

No, _____ will not be returning for lessons. Please consider our "time slot" available for a new student.

Parent/Guardian/Adult Student Initial _____

I give permission for e-mail contact by MOIRA BUCK. _____ (Please initial)

I understand my name & phone number & email address will be included in the Teaching "Swap" Roster if so desired.

YES No Thanks _____ (Please initial)

Name of Student (s) registering: 1. _____ 2. _____

3. _____ 4. _____

Name of Parents/Guardians: _____

The time slot[s] that we are **renewing** is/are: _____ **OR a NEW TIME**

_____. [New Times will be scheduled after the Registration Deadline]

If 2 residences are applicable to a registration [i.e. Mom's house and Dad's house] please make sure I have this info. Thanks!

Mailing Address (INCLUDING **Postal Code**):

Home Phone: _____ Work Phone: _____ Cell Phone: _____

I'd like to contact you using Text Messaging. Is this possible? YES NO If **Yes**, what number should be used?

_____.

PREFERRED E-mail Address for Contact: _____

Birthday of Student: Month: _____ Day: _____ Year: _____ mm-dd-yyyy: ____ - ____ - ____

Age as of June 30th: _____

School Attending: _____

Grade in School [at time of registration]: _____

Are you interested in the national Royal Conservatory of Music Exam Program as your child progresses?

YES NO [Please ask me for details if you are unsure]

Does your child have access to an Apple iPad? YES NO

[If **YES**, you will have access to the Music Apps PIANO MAESTRO (Sight Reading) & SPROUT BEAT (Theory Worksheets)] There are 2 iPads available for weekly borrowing, please ask. Students have access to BOTH of these apps before or after their lesson at the studio.

Will your child be participating in the annual SPRING RECITAL for Family and Friends? YES NO

Does your child have FOOD ALLERGIES? [i.e. nuts]: YES NO If yes, to which foods? _____

[I sometimes provide "treats for my students"]

**This document will be kept on file as long as student takes lessons here at Music Is Marvelous Piano.
Please keep your information up to date.**

[Please feel free to fill this document in on your computer and email back to me, drop in my mailbox or deliver to me]