



Creating Art Experiences

Registration Form

STUDENT NAME DATE OF BIRTH
M F
M F
M F

Address: E Mail:

City: State: Zip Code:

Responsible Party (for Payment): Date of Birth:

Phone Numbers: (Home) () (Work/Cell) ()

In case of emergency: Contact Name Relationship: Phone:

Why did you choose the Beck Center for the lessons/classes? :

How did you hear about the Beck Center? Advertisement Catalog Family/Friend Library School Website Other

If referred, please list the name of the individual who referred you: :

CLASSES

Table with 8 columns: Student, Class, Course #, Day, Time, Session, Tuition, Start Date

PRIVATE LESSONS/SESSIONS

Table with 10 columns: Student, Instrument, Instructor, Course #, Day, Time, Length, Wks, Tuition, Start Date

For a fee, you may request to be enrolled in a tuition payment plan. There is a \$10 fee for a two payment plan. Fifty percent (50%) of tuition will be due upon registration with the remainder due on the first of the third month. A four payment plan has a \$20 fee with 25% of tuition due upon registration with due dates on the first of each of the next 3 months

PAYMENT SUMMARY

METHOD OF PAYMENT

Tuition \$
Payment Plan Fee (\$10 or \$20 if applicable) \$
Donation \$
Amount Applied \$ -
TOTAL \$

Cash Receipt No. FA Application attached
Check No. A \$35 charge will be assessed for checks returned for any reason.
Visa MasterCard Discover American Express
Card No.
Expiration Date cvv
Name on Card

- By signing this document I understand:
If I/my child require(s) emergency medical treatment while under the jurisdiction of the Beck Center for the Arts, I authorize the Beck Center to contact emergency medical services and to perform treatment as deemed necessary.
I/my child may be photographed/videographed for use by Beck Center in Beck Center publications/website, or for use by all forms of media.
That the signing of this form implies agreement to, and the observance of, the Rules and Regulations of Beck Center and the payment of all fees associated with the course(s), lessons, instruction, sessions as listed above.

Signature of Responsible Party: Date:

The Beck Center for the Arts reserves the right to change any rule, regulation, policy, class, schedule or instructor without notice