

Northeast Iowa School of Music
2728 Asbury Road, Suite 200 Dubuque, Iowa 52001
Phone (563) 690-0151 Fax (563) 690-0152

Private Lesson Registration for 2008-2009 School Year

Adult Contact Information (please print): *(Adult student, or parent info if student is a minor)*

Adult Name(s): _____ Home Phone: _____

Address: _____ City, State and Zip: _____

Work/Cell Phone: (Mom) _____ (Dad) _____ Email: _____

*****Please circle or star your preferred method of contact.**

→ See Student Handbook for complete list of policies and guidelines for lessons.

By registering at NISOM, you are agreeing to abide by the policies and adhere to the payment dates stated in the NISOM Student Handbook.

Signature: _____ Date: _____

Student #1 Information:

Name: _____ Instrument: _____

Birthdate (mm/dd/yy): _____ School: _____ Grade: _____

How long have you studied this instrument? _____ Other instruments studied? _____

Instructor/Instrument: _____

Date of first lesson: _____ **Assigned lesson day/time:** _____

Notes: _____

Student #2 Information:

Name: _____ Instrument: _____

Birthdate (mm/dd/yy): _____ School: _____ Grade: _____

How long have you studied this instrument? _____ Other instruments studied? _____

Instructor/Instrument: _____

Date of first lesson: _____ **Assigned lesson day/time:** _____

Notes: _____

Student #3 Information:

Name: _____ Instrument: _____

Birthdate (mm/dd/yy): _____ School: _____ Grade: _____

How long have you studied this instrument? _____ Other instruments studied? _____

Instructor/Instrument: _____

Date of first lesson: _____ **Assigned lesson day/time:** _____

Notes: _____