

**COMMUNITY MUSIC SCHOOL
LEHIGH VALLEY
REGISTRATION FORM**

CLASSES

(write information above line)

X _____

↑ Student Name: Last First

↑ Address: Number & Street City State Zip

↑ Telephone: Day Evening

↑ E-Mail

↑ Age Date of Birth School – Grade

↑ Father's name Mother's name

1. 3.

2. 4.

↑ List Class(es) you are registering for:

Class Registration Fee: \$10.00 per year _____

Class Tuition: _____

Make check payable to: CMS Amount Enclosed: _____

↓ (Please circle one)

MC, Visa, Disc, AmExp Card # _____

Exp Date: _____ Zip Code _____

Signature: _____

Mail Form to: Community Music School (610-435-7725)
23 N. Sixth Street, 2nd Floor, Allentown, PA 18101