Roberts Community Music School

**Send registration form
and payment to:**

Jillian Lauritzson, Coordinator

Roberts Community Music School

2301 Westside Drive

Rochester, NY 14624

Make checks payable to **RCMS**

# Registration Form

# NYSSMA Prep. Lessons

**ONE APPLICATION PER STUDENT**

***Registration Information:***

Student’s name:

Birth date: Age:  New  Returning

Parent or Guardian (if applicable):

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about RCMS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Payment Information:***

Four 45-minute lessons for $140

No registration fee

***Lesson Information:***

Instrument or Voice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Please specify type of instrument or voice part)***

Date of NYSSMA Solo Festival ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Please return the registration form and payment 6 weeks prior to this date.**

NYSSMA Solo \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Composer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment Plan:**

* **Payment in full is due 6 weeks prior to the Festival date.**
* **No registration fee.**

**Check option:**

* Make checks payable to: **ROBERTS COMMUNITY MUSIC SCHOOL or RCMS.

Credit card option:**
* We are now offering the ability to pay invoices online! To access the online portal, visit [www.roberts.edu/rcms-payment](http://www.roberts.edu/rcms-payment).

 **Total amount included:** \_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand that enrollment in RCMS is for four 45-minute lessons. I understand that RCMS must receive the full amount due on or before 6 weeks prior to the date of the NYSSMA solo festival, as noted on this registration form, and that if full payment is not received by the due date, my child is not eligible to receive further lessons. I agree that should my account not be kept current, the RCMS may restrict my ability to register for future lessons and participate in concerts.**

**Signature of Student or Parent/Guardian Date**

(If student is under 18)

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