

CLASS ENROLLMENT FORM



Child's Name: _____

Child's Birth Date: _____

Parent/Guardian: _____

Address: _____

City: _____ Zip: _____

Cell Phone: _____

Home Phone: _____

E-mail: _____

Parent or Guardian Signature: _____

Print Name: _____

*** Class Time Preference ***

Monday: 11:30 - 12:00 _____

Tuesday: 8:15 - 8:45 _____

11:00 - 11:30 _____

11:30 - 12:00 _____

Wednesday: 8:15 - 8:45 _____

* Due to limited availability, be sure to include at least 2 class choices

CLASSES BEGIN: Fall 2011 Session – August 15th; Spring 2012 Session – January 2nd, 2012
(Weeks 1-15) (Weeks 16-30)

CLASS COST: \$150.00 per 15-week session (*Make checks payable to: TESSI*)

CLASS LOCATION: TESSI

705 W. Main Ste. B1, Carbondale IL 62901

Contact:

Alyce Ward (*Licensed KiddyKeys Educator*)

Phone: 618-457-6300 ext. 2#

E-mail: award@tessimusic.org

Web site: www.tessimusic.org