



**TRINITY**  
CHRISTIAN SCHOOL  
**School of Music**

2170 Itabashi Way, Burlington, ON, L7M 5B3 Tel: (905) 630-2179 [som@tcsonline.ca](mailto:som@tcsonline.ca)

**Registration Form 2010-2011**

<b>Student Name</b>		<b>Student's Grade</b> (as of September 2010)	
<b>Parent(s) Name</b>		<b>Home Phone</b>	
<b>Email</b>		<b>Work Phone</b>	
<b>Lesson Type (Instrument)</b>		<b>Cell Phone</b>	
<b>Notes</b>			

**Student's Music Background:**

<b>Lesson Day</b> (indicate preferences)		<b>Lesson Time</b>	To be determined
<b>Music Teacher</b>			

**Program Cost for September 2010-June 2011**

<b>Number of Lessons</b>	To be determined	<b>Cost per lesson</b>	<b>\$20.00</b>	<b>Total</b>	Per Payment Schedule
<b>Payment received</b>	<b>\$25.00 Registration Fee</b> (before May 21 <sup>st</sup> , 2010)				
	<b>\$35.00 Registration Fee</b> (after May 21 <sup>st</sup> , 2010)				

**Acceptance:** The undersigned agrees to the financial arrangements, policies and procedures as outlined in the Policies and Procedures 2010/2011, rev. 5/3/10.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<i>Office use only</i>	
Date received	_____
Registration Fee	_____
Payments received	_____