

PERFORMING ARTS CENTER GREAT HILLS BAPTIST CHURCH

Student's Name _____ Birth Date _____

Parent's Name (if applicable) _____ Sex (Circle) M F

Address _____

City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____

Work Phone _____ Other Phone _____

E-Mail Address _____

Instrument _____ School _____

Payment Option (Circle One) Monthly Full Semester

Is student a member of GHBC? (Circle) Yes No

If not, where do you attend church? _____

As the _____ student or _____ Parent/Guardian of the above student, I accept the responsibility for the attendance of each lesson. I understand that I will be charged for unexcused absences with no make-up. I commit to study for the entire semester. I agree to pay the tuition in a prompt and timely manner.

Student's Signature _____ Date _____

Parent's Signature (if applicable) _____ Date _____

OFFICE USE ONLY

Date Entered _____

Amount Received Cash _____ Check _____ Charge _____

Instructor's Name _____

Lesson Date Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Lesson Time _____

Lesson Place _____