



Laura Childress, Director
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610-688-3335
www.artpiano.org

Student Registration Form

Student Name _____

Parent (s) _____

Address _____

Telephone: Home _____

Work/Cell _____

E-Mail _____

Age/ Birthdate _____

Grade/School _____

Hobbies/ Sports/ Activities _____

Piano History (please list all previous teachers and number of years of study with each)

Names and Ages of Siblings _____

Information about your Piano: make, size, year, etc. (if known)

How did you hear about us?

I hereby submit this application for my child(ren)'s admission to Art Piano. I am enclosing a \$50 non-refundable tuition deposit per student. I have read Art Piano's tuition policy and agree to all of its terms.

X

REQUIRED Signature of Parent or Guardian

DATE