

LUCY MOSES SCHOOL REGISTRATION FORM

Lucy Moses School at Kaufman Music Center
Goodman House, 129 West 67th Street New York, NY 10023

Class information is available at **KaufmanMusicCenter.org**
T 212 501 3360 | **F** 212 874 7865
E lucyposeschool@kaufmanmusiccenter.org

Check all that apply:

- Fall Spring
 Summer 20 ____
 New student
 Returning student
 AD YPD SMS

OFFICE USE ONLY

Registration Date _____

How did you hear about us?

- Neighborhood Family Member
 Word of Mouth Internet
 Postcard/mailling Merkin Hall
 Special Music School Other

STUDENT INFORMATION

If more than one member of the family is registering for classes, a separate registration form should be completed for each person.

First Name _____

Last Name _____

Date of Birth (Students under 18) ____/____/____

Gender _____

School (Students under 18) _____ Grade _____

Home address _____ City _____ State _____ ZIP _____

Phone (home) _____ (cell) _____ (work) _____

E-mail(s) _____

Parent or guardian 1 (Students under 18) _____ Relationship _____

Phone (work cell) _____ Company _____ Occupation _____

Parent or guardian 2 (Students under 18) _____ Relationship _____

Phone (work cell) _____ Company _____ Occupation _____

The Center asks that you participate in an **optional** demographic survey.

- Native American/Alaskan African American/Black
 Hispanic/Latino Native Hawaii/Pacific Islander
 Asian White Other

Information collected is used to improve community engagement initiatives, and inform grant applications and annual reporting requirements that can increase financial support.

PRIVATE LESSONS

New students: Teacher assignment is made in consultation with the Lucy Moses School.

Please call 212 501 3360 to arrange a placement session. **Returning students:** Please complete the following:

Instrument _____ Room No. _____

Teacher _____ Start Date: _____

Preferred day S M T W TH F Length 30 45 60 90 B

Preferred time range _____

Young Artist Program with Honors

Young Artist Program Diploma Level

OFFICE USE ONLY

Reg ID _____

No. of lessons _____

Tuition \$ _____

CLASSES

For ensemble placement, please indicate instrument/voice type: _____

NAME OF CLASS	TEACHER	DAY	TIME	START DATE	(OFFICE ONLY) REG ID	TUITION
						\$
						\$
						\$
						\$

Materials fee (refer to specific course information) \$ _____

Discount \$ _____

TOTAL \$ _____

PAYMENT

Adult students must pay their tuition in full. All others, if registering for a single semester or if grand total is \$1000 or less, enclose full amount. If grand total is more than \$1000 and you are registering prior to August 1 for the full year, you may pay a deposit of \$390. After your program is confirmed by the Registrar, a statement will be sent to you. **Make checks payable to Lucy Moses School.**

Check \$ _____ Check no. _____ (There will be a \$25.00 fee for all returned checks.)

Scholarship Applicant

Cash \$ _____ (in person only) Second ZIP for billing _____

Card \$ _____ Visa Master Card American Express Discover

Credit card no. _____

Name on card _____ Exp. date _____

Signature _____ Sec. code _____

I authorize Lucy Moses School to automatically charge this card for subsequent tuition installments toward the lesson(s) and class(es) listed above.

TUITION AND FEES TOTAL \$ _____

Adult registration fee \$ 30.00

Child/teen registration fee \$ 45.00

Suggested contribution (Tax-deductable) \$ 25.00

GRAND TOTAL \$ _____