

# Jessica Olson Piano Studio

(406) 451-4848 · pianohearder@gmail.com · www.olsonpianostudio.com

## Student Enrollment Sheet

Student's Name: \_\_\_\_\_ School Grade: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_ Other instruments? \_\_\_\_\_

Names of parents or guardians: \_\_\_\_\_

Mailing address (including city and zip code): \_\_\_\_\_

Parent phone: \_\_\_\_\_ Parent phone: \_\_\_\_\_

Student phone: \_\_\_\_\_ Student email: \_\_\_\_\_

Who should I contact via phone or email regarding scheduling, studio information, or assignments?

\_\_\_\_\_

Do you prefer monthly, semester, or annual tuition? \_\_\_\_\_

Do you prefer online or in-person lessons (when available) for 2020-2021? \_\_\_\_\_

Does anyone in the home play the piano? \_\_\_\_\_

Does your child have any special learning or personal needs that I should be aware of in order to provide the best possible instruction?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your child have any food allergies or dietary restrictions?

\_\_\_\_\_

Do you have any special goals for piano lessons I should know about?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Payment Agreement and General Liability Waiver**

I have read and I agree to abide by the payment terms and policies outlined in Jessica Olson's Fee Table, Studio Policy, and Studio Policy Addendum for 2020-2021.

I affirm that any loss or injury suffered by me, my child, or my property because of participation in any studio activity or use of equipment or facilities during lessons or any studio-related event is my sole responsibility, and that, to the greatest extent allowed by law, I will not hold Jessica Olson Piano Studio or Jessica Olson liable for any such loss or injury.

Signed: \_\_\_\_\_

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

## **Media Release**

I give permission to Jessica Olson Piano Studio and Jessica Olson to create and post photographs, audio, and video recordings of my child using his/her first name on the studio's Facebook page, website, blog, YouTube channel, or in printed promotional materials.

I understand that some competitions or events may require publication or disclosure of my child's full name and address. I consent to this publication or disclosure as it relates to entry into these competitions or special events.

Signed: \_\_\_\_\_

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