

Music Corner Registration Form

Name of student _____

Age of student _____

Instrument _____

Name of parent or guardian _____

Address: _____

Phone # _____

Email: _____

***I have read Music Corner's full studio policies, and I will abide by each policy term to commence and continue musical studies at Music Corner.**

**The right to take any legal action for injuries sustained on the studio property is waived. You agree to release and discharge Music Corner from all liabilities and claims due to having participated in its musical activities.*

***Music Corner reserves the right to deny service at any time.**

***Tuition/fee charges and studio policies are subject to change.**

Signature _____

Date _____