

SUMMER REGISTRATION 2024

Please complete all areas below and sign after reading the KCMS Policies document.
Information will be forwarded to teachers and used for student records and school administration purposes.

CONTACT INFORMATION				NEW <input type="checkbox"/>	RETURNING <input type="checkbox"/>
Parent/Guardian or Adult Student Name			Relationship to Student (if applicable)		
Mailing Address - Street			City	Postal Code	
Main Phone		Alt. Phone		Email:	
Medical condition(s) of concern?	Yes	No	Emergency Contact:		
If YES, please advise:			Phone:		
			Email:		

Important: I understand **ALL** schedules must be confirmed with **each** teacher before registration.
I have read and understand the KCMS policies document.

Print Name (Parent/Guardian/Adult Student)

Signature (Parent/Guardian/Adult Student)

Date

Summer fees must be paid in full at the time of registration.

The \$20 Summer Registration Fee will be deducted from the Annual Registration Fee if the student continues to study in the 2024-25 school year, September to June.

LESSON FEE INFORMATION							Office Use	
Student (full name)	Date of Birth (yy/mm/dd)	Instrument or Group Program	Teacher	Day	Lesson Length	First Lesson	Last Lesson	Total # of weeks

FOR OFFICE USE ONLY

Fees	# of Lessons	Price	Total	Payment Total	Invoiced in Sage	Sage Payment J#	In File Maker