



## Registration 2024/25

### The Process

1. Confirm all lesson times and start date for each student with your instructor(s). KCMS follows the School District 23 academic calendar (see over), but all teachers are responsible for their own schedule, which may vary
2. Review our KCMS Policies document\*
3. Complete Registration form attached or use our fillable form on our website. One form per family please.
4. Sign Registration form to confirm you have read the Policies document
5. Submit Registration form either:
  - a. In person with the registration fee\*
  - b. Via email as a pdf to [kelownacommunitymusicschool@shaw.ca](mailto:kelownacommunitymusicschool@shaw.ca), sending at the same time the registration fee via e-transfer to the same email address – **please add student name with the e-transfer**
6. Once processed, you will receive an email with your invoice and instructions for payment.

### Office hours:

Monday/Wednesday: 11am-2pm, 3pm-5pm

Tuesday/Thursday: 9am-2pm

[kelownacommunitymusicschool@shaw.ca](mailto:kelownacommunitymusicschool@shaw.ca)

250-860-1737

Please email or telephone prior to visiting to confirm summer office hours.

\*Registration fee information can be found on the KCMS Policies document

### Win Back Your Registration Fee!!

All families who have paid their annual Registration Fee by **4:30pm, Thursday, June 26th**

**will be entered into a draw to win back their registration fees!**

*(Credit will be applied against annual fees for 2024/25. No cash value.)*

## 2024-2025 KCMS Academic Calendar

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat		
<b>September</b>	1	2	3	4	5	6	7	School begins September 3rd	
	8	9	10	11	12	13	14		
	15	16	17	18	19	20	21		
	22	23	24	25	26	27	28		Truth and Reconciliation Sept 30th
	29	30							
<b>October</b>			1	2	3	4	5		
	6	7	8	9	10	11	12	Thanksgiving October 14th	
	13	14	15	16	17	18	19		
	20	21	22	23	24	25	26		
	27	28	29	30	31				
<b>November</b>						1	2		
	3	4	5	6	7	8	9	Remembrance Day Nov 11th	
	10	11	12	13	14	15	16		
	17	18	19	20	21	22	23		
	24	25	26	27	28	29	30		
<b>December</b>	1	2	3	4	5	6	7		
	8	9	10	11	12	13	14		
	15	16	17	18	19	20	21	Schools closed Friday 20th Winter Break Dec 23 to Jan 3	
	22	23	24	25	26	27	28		
	29	30	31						
<b>January</b>				1	2	3	4		
	5	6	7	8	9	10	11	School reopens Jan 6th	
	12	13	14	15	16	17	18		
	19	20	21	22	23	24	25		
	26	27	28	29	30	31			
<b>February</b>							1		
	2	3	4	5	6	7	8		
	9	10	11	12	13	14	15	Family Day Feb 17th	
	16	17	18	19	20	21	22		
	23	24	25	26	27	28			
<b>March</b>							1		
	2	3	4	5	6	7	8		
	9	10	11	12	13	14	15	Schools closed Friday 14th Spring Break 17th-28th	
	16	17	18	19	20	21	22		
	23	24	25	26	27	28	29		
30	31								
<b>April</b>			1	2	3	4	5		
	6	7	8	9	10	11	12		
	13	14	15	16	17	18	19	Good Friday April 18th Easter Monday April 21st	
	20	21	22	23	24	25	26		
	27	28	29	30					
<b>May</b>					1	2	3		
	4	5	6	7	8	9	10		
	11	12	13	14	15	16	17	Victoria Day May 19th	
	18	19	20	21	22	23	24		
	25	26	27	28	29	30	31		
<b>June</b>	1	2	3	4	5	6	7		
	8	9	10	11	12	13	14		
	15	16	17	18	19	20	21		
	22	23	24	25	26	27	28	Last Day of school June 26th	
	29	30							

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
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The KCMS Office is closed on shaded days - Teachers may still hold lessons.  
Please confirm your schedule directly with your teacher.

# REGISTRATION 2024/2025

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 Name or Adult Student Name			Relationship to Student (if applicable)				
Mailing Address – Street		City	Postal Code				
Phone 1	Phone 2	Email					
Medical condition(s) of concern?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Emergency Contact:					
If Yes, please advise:		Email:					
		Phone:					
I would like to receive the KCMS Newsletter by email <input type="checkbox"/>		Already Received <input type="checkbox"/>					
I would like to be a KCMS Society Member - \$10 fee <input type="checkbox"/> Thank you for your support!							
LESSON INFORMATION						Office Use Only	
Student full name	DOB yy/mm/dd	Instrument Group Program	Teacher	Lesson Length & Day of Week	First Lesson	Last Lesson	Total # of weeks
I have read and understand the KCMS Policies document							
----- Print Name (Parent/Guardian/Adult Student)		----- Signature (Parent/Guardian/Adult Student)			----- Date		

Registration forms can be dropped off or emailed to: [kelownacommunitymusicschool@shaw.ca](mailto:kelownacommunitymusicschool@shaw.ca)

FOR OFFICE USE ONLY						
Fees	# of Lessons	Price Total	Payment Total	Invoiced in Sage	Sage Payment J#	In File Maker
<i>Registration</i>						