

# PRIVATE LESSON FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

I WOULD LIKE PRIVATE LESSONS AT:

WARREN STUDIO \_\_\_\_\_

SHELBY STUDIO \_\_\_\_\_

DAYS AVAILABLE: \_\_\_\_\_

TIMES AVAILABLE: \_\_\_\_\_

SUBJECTS: \_\_\_\_\_

I WOULD LIKE A HALF HOUR TIME SLOT\* \_\_\_\_\_

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\*COST IS \$25 PER HALF HOUR CASH ONLY