

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* _____

I WOULD LIKE AN HOUR TIME SLOT* _____

*COST IS \$30 PER HALF HOUR CASH ONLY