Make Music Enrollment
Summer 2005

Personal Information

Student's Name:_____ Age: _____

Mailing Address:_____

Home Phone: _____ Emergency Contact: _____

Parent's Names:_____ Work Phones: _____

Email: _____ Cell Phone & Name:_____

Please Mark an X next to the class time you would like to sign-up for

	3-week Session 1* Weeks 6/27 – 7/11	3-week Session 2* Weeks 7/25 – 8/9
Wed. 10:00 – 10:45am	_____	_____
Thurs 10 – 10:45am	_____	_____
Thurs 11:00 – 11:45am Returning Students ONLY	_____	_____

*Each session runs for three weeks with one class per week

Cost per Session **$60.00 (three classes)**

Enrollment and Payment due one week before start of each session

Please make checks payable to Lisa Spector and send to:
Lisa Spector
80-Q N. Cabrillo Hwy. #228
Half Moon Bay, CA 94019

Lisa Spector's Music School
731 Main Street, Half Moon Bay, CA 94019
650-726-5119