



Unleashing the Power of Music!

Lesson / Class Payment/Registration Form

Student Name: _____ Age _____

Please mark PCM Program Choice: Private Lesson _____ Classroom _____

Private Lessons:

Teaching Artist: _____ Day: _____ Time: _____

Private Lessons can be paid for every lesson (payment for the first and last lesson are due at the beginning of the lessons), every 4 lessons, or every 8 lessons. Please mark with an x how you are paying for your lessons.

Hour Lessons:

Pay per lesson (first and last lesson up front) \$43.00 per hour _____
Pay for four lessons at a time: \$40.00 per hour (\$160.00) _____
Pay for eight lessons at a time: \$38.00 per hour (\$304.00) _____

45 Minute Lessons:

Pay per lesson (first and last lesson up front) \$33.00 per 45 minutes _____
Pay for four lessons at a time: \$30.00 per 45 minutes (\$120.00) _____
Pay for eight lessons at a time: \$28.00 per 45 minutes (\$224.00) _____

30 Minute Lessons:

Pay per lesson (first and last lesson up front) \$23.00 per 30 minutes _____
Pay for four lessons at a time: \$20 per 30 minutes (\$80.00) _____
Pay for eight lessons at a time: \$18 per 30 minutes (\$144.00) _____

Group Lessons for 2 students (all group lessons are one hour)

Pay per lesson (first and last lesson up front): \$27.00 per student per hour, \$54.00 total _____
Pay for four lessons at a time: \$25.00 per student per hour (\$100.00 for each student, \$200.00 total) _____
Pay for eight lessons at a time: \$23.00 per student per hour (\$184.00 for each student, \$368.00 total) _____

One Time Registration Fee of \$10.00 (for New Students Only)

I am already a student and don't need to pay a registration fee. _____

Total Amount Due: _____

Classes: All Classes are \$60.00 for six weeks

Name of the Class _____

Day _____ time _____

Total Amount Due: _____

Payee Name: _____

Billing Address: _____ City: _____ Zip: _____

Phone Number: _____ E-Mail: _____

Method Of Payment: Cash _____ Check _____ Other; _____

Check Number _____ Driver's License Number: _____

Delivery Method: PCM Drop Box _____ On-Line _____ PO Box _____

Date: _____