

Jeanette Sacco-Belli

Private Student Registration Form

Name *(Please Print)*

Home Address

Home Phone Number

Cell/Pager Number

Business Address

Business Phone Number

Email Address

The studio is open Monday – Thursday from 10:00 am – 9:00 pm.

Please indicate ALL possible times you are available for lessons so I may try to accommodate your schedule. Please indicate morning, noon and evening time slots. (Example: Sally Smith would like lessons every week either on Mondays 6-8 pm or Thursday 10:00 am).

Group lessons	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please place me on your waiting list	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please contact me when you have a cancellation	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you want a weekly lesson?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you want a bi-weekly lesson?	Yes <input type="checkbox"/>	No <input type="checkbox"/>