## **Piano Lessons Registration**

| Student'                      | 's Name  |   |
|-------------------------------|--|---|
| Parent's Name (if applicable) |  |   |
| Home Pl                       | hone Work Cell   |   |
| E-mail address                |  |   |
|                               | City Zip   |   |
|                               | 's AgeStudent's Grade (if applicable)School                              |   |
| Have yo                       | ou had private piano lessons previously? (check one)                     | · |
|                               | Years of Piano StudyName(s) of previous teacher(s):                      |   |
| How did                       | d you find out about Robert Carney (please check)?                       |   |
| <u>     Т</u>                 | Through a friend/acquaintance.   |   |
|                               | If so, whom (current students may receive a free lesson for referrals)?  |   |
| T                             | Through an organization. If so, which one?                               |   |
|                               | found Robert Carney's website online. If so, how?                        |   |
|                               | Through an online search engine. If so, which one? (google, yahoo, etc.) |   |
|                               | By navigating to it through another site. If so, which one?              |   |
|                               | Other. Please specify:   |   |
|                               |  |   |

Please Note: Students enrolling in lessons on a continuing weekly basis must also pay a non-refundable registration fee and read and sign the Studio Policies.