

RICHTER PIANO STUDIO

REGISTRATION FORM

*Please read the policies and procedures attached and then sign this contract for my files.
I AGREE TO THE POLICIES AS LISTED AND WISH TO ENROLL MY CHILD IN
PIANO LESSONS FOR THE 2026-2027 SCHOOL YEAR.*

*SIGNATURE:
(Parent)*

DATE:

*I AGREE TO THE POLICIES AS LISTED AND WISH TO ENROLL
IN THE PIANO COURSE FOR THE 2026-2027 SCHOOL YEAR.*

*SIGNATURE:
(Student)*

DATE:

STUDIO INFORMATION

Student's Full Name:

Parents' Names:

Age: _____

Address:

Date of Birth: _____

Grade this year: _____

Home Phone: _____

School: _____

Work Phone: _____

Email Address: _____

Cell Phone: _____

Please check if Yes:

Student names & pictures may be posted on the studio website.

Student performance videos may be uploaded to YouTube and posted on the studio website.

Contact name, phone #, and email address may be placed on a "swap" list to exchange with other students.

