

Registration Form

Kindermusik

Please circle class preference:

Sign & Sing Monday 9:45 am – 10:30 am

Fiddle-Dee-Dee Monday 10:45 am – 11:30 am

Child's Name: _____

Male _____ Female _____ Age: _____ Date of Birth: _____

Parents/Guardian: _____

Address: _____

Home Phone: _____ Email: _____

Mother's Work/Cell: _____ Father's Work/Cell: _____

Medical Conditions/Food Allergies: _____

Siblings Names and Ages: _____

Additional Contact/Carpooling with: _____

What aspects of your child's experience are most important to you? _____

Please contact My Smart World Learning Center to obtain tuition information.

Phone: (801) 796-0599
 E-mail: info@mysmartworld.com

I hereby enroll my child _____ in My Smart World Learning Center Kindermusik classes for the school year August 20__ through May 20__. I understand that paid fees are not refundable. I give permission for my child to participate in school activities and will not hold MSW responsible for any injuries or accidents that may occur during the class hours. I authorize MSW to photograph my child and to use such photographs on MSW Blog and classroom use only. As the parent/guardian I will attend each class with my child. I agree to pay tuition by the fifth of every month or I will be assessed a \$10 late fee. I understand that missed days of school will not be credited.

Parent/Guardian Signature _____ Date _____