



NEWTON MUSIC ACADEMY 2018/2019

Form 2: Classes Registration

Group Cl.	Private L.
1st sess.	Fall Spring
2nd sess.	Winter Summ.

- Submit completed form and tuition to: 14 Roland Street, Newton, MA 02461
- Make check payable to: Newton Music Academy Phone: (617) 630-0952 • www.NewtonMusicAcademy.com

NEW Student
 Continuing Student
 Continuing Student, new instrument/class
 Returning Student

Student _____ DOB _____

1. PRIVATE LESSONS (14-week session) For Payment Plan Option - Use Form #6 instead of this form.
 Tuition: 30 min.: \$644 (\$46 each) 45 min.: \$882 (\$64 each) 60 min.: \$1148 (\$83 each)

Prior instruction No Yes What instrument(s) and how long? _____

Instrument	Teacher	Day/Time (pre-approved by office)	Length	Tuition	Calculate Payment
#1 _____	_____	_____	30 min.	\$644	_____
			45 min.	\$896	_____
			60 min.	\$1162	_____
#2 _____	_____	_____	30 min.	\$644	_____
			45 min.	\$896	_____
			60 min.	\$1162	_____
#3 _____	_____	_____	30 min.	\$644	_____
			45 min.	\$896	_____
			60 min.	\$1162	_____

2. MUSIC GROUP CLASSES

Class Name	Day/Time (pre-approved by office)	Weekly Tuition + Homework Fee	Calculate Payment
Musical ABC:			
• Pre-Keyboard ABC (15-weeks); add \$20 for Homework	_____	\$340 + \$20	\$360 _____
• Keyboard ABC (15-weeks) add \$20 for Homework	_____	\$340 + \$20	\$360 _____
Singing Circle (15-weeks)	_____	\$320	_____
String Ensemble (15-weeks)	_____	\$300	_____

3. DANCE PROGRAMS (15-week session)

Day&Time: **Please select 2nd/3rd choice Day/Time in case 1st choice is unavailable

Tiny Tots (Mommy & Me)	_____	<input type="checkbox"/> \$195	_____
Little Dancers	_____	<input type="checkbox"/> \$225	_____
Ballet/Tap/Hip-Hop	_____	<input type="checkbox"/> \$225	_____
Ballet/Jazz/Hip-Hop	_____	<input type="checkbox"/> \$225	_____

ANNUAL REGISTRATION FEE: \$40/student, \$50/family for each academic year (Sept. to Sept.)

\$ 40 / \$50

RECITAL FEE: \$20 per student /per each recital (only submit with Fall & Spring registraion)

\$ 20 / \$0

DATE _____

Credits or Discount if applicable. Please Specify: _____)

(- _____)

TOTAL DUE:

\$ _____

PARENT/ADULT SIGNATURE: I certify that the information above is complete and correct. I have read NMA policies and procedures and agree to abide by them.

Check #:

Otlk. Excl. Eml. QB. #Less-folder