



# NEWTON MUSIC ACADEMY 2017/2018

## 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.: \$630 (\$45 each)    45 min.: \$882 (\$63 each)    60 min.: \$1148 (\$82 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.	\$630	_____
			45 min.	\$882	_____
			60 min.	\$1148	_____
#2 _____	_____	_____	30 min.	\$630	_____
			45 min.	\$882	_____
			60 min.	\$1148	_____
#3 _____	_____	_____	30 min.	\$630	_____
			45 min.	\$882	_____
			60 min.	\$1148	_____

### 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	_____	\$320 + \$20	\$340 _____
• Keyboard ABC (15-weeks) add \$20 for Homework	_____	\$320 + \$20	\$340 _____
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.)

\$ \_\_\_\_\_

**RECITAL FEE:** Only Fall & Spring Session \$20

\$ \_\_\_\_\_

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