

# Student Registration for Music Enrichment Instruction

Revised 7/05

I would like for my child to participate in the Music Enrichment Program of the Garland Independent School District by taking \_\_\_\_\_ lessons. I understand that  
(Instrument or voice)

- Lessons are charged at a flat rate of \$15.00 per lesson payable to the Music Enrichment Teacher.
- Lesson will be paid in advance at the first lesson of each month.
- Students provide all instructional materials (books, music, etc.)
- Students are expected to notify private instructors at least 24 hours in advance of missing a scheduled lesson. The instructor and/or school director may make exceptions in the event of sudden illness or emergency. The instructor may provide makeup lessons subject to agreement with the students and parents. Unexcused absences will not be made up and no refund will be made.
- Students may stop taking lessons at the end of any month. A student may be dropped by an instructor, with approval of the school director, for excessive absences, failure to make satisfactory progress or unacceptable behavior.

## WAIVER OF LIABILITY OF GARLAND INDEPENDENT SCHOOL DISTRICT PARENT/LEGAL GUARDIAN AND STUDENTS 18 YEARS OR OLDER

I am the parent or legal guardian of the student named below, or a student eighteen (18) years or older, who desired to receive music instruction from the GISD Music Enrichment Program. I understand that the music instructors and volunteers are not employees or volunteers of the Garland Independent School District. I agree to hold harmless the Garland Independent School District, its employees, agents, representatives, and Board of Trustees, from and against any and all claims, causes of action, damages, losses, and expenses, including attorney's fees, arising out of or resulting from participation by the student named below in the GISD Music Enrichment Program.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Signature of Student 18 years or older

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home Telephone

\_\_\_\_\_  
Work telephone for parents

\_\_\_\_\_  
Date

\_\_\_\_\_  
email address

Music Class Period \_\_\_\_\_ Period of NonAcademic Class \_\_\_\_\_

Lessons Desired During/Before/After School \_\_\_\_\_

Teacher from last year \_\_\_\_\_

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### To be filled out by Music Enrichment Instructor

Instructors Name \_\_\_\_\_ School where lesson is taught \_\_\_\_\_

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Please return this registration form, along with a check for the first month's lessons to your student's Music Enrichment Teacher. This form is to be kept on file with GISD music teacher.