



# Pacific Institute of Music

540 Plaza Drive, # 130 ♪ Folsom, CA 95630 ♪ (916) 985-8882 ♪ www.piom.org

## Student

First Name

Last Name

Age

Birthday

Studio

Instrument(s)

School Name

Grade in 2016-2017

Musical  
Experience

## Parent

First Name

Last Name

Address/Street

Address 2nd line

City

Zip

Home Ph

Mobile Ph

Work Ph

Email

How did you hear about us?

## Method Of Payment

All the charges will appear on your bank statement as Pacific Institute Of Music

Checking Account - attach void check to this form

Initial payment is going to be prorated according to the date of the first lesson and is going to be equal to \_\_\_\_\_ + the annual studio fee \_\_\_\_\_ + accompaniment fee \_\_\_\_\_ = \_\_\_\_\_ .

I hereby authorize Pacific Institute Of Music to charge my account of \$\_\_\_\_\_ on the first day of each month starting \_\_\_\_\_ .

In event of the lesson termination, I will give the school office a written notice four lessons in advance to discontinue these charges.

I understand the school policies and agree to abide by them.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date