

Lesson Policy Agreement

Student Full Name: _____ Birth Date: _____

Parent/Guardian Full Name (If younger than 18): _____

Mailing Address (Include PO Boxes, City, State, Zip):

Phone Number(s):

Email Address(es): _____

Other Contact Info or Important Notes: _____

Preferred Method of Contact (Text, Email, Call, Mail, Messenger, etc.) _____

(If someone other than the student or parent is paying for the lessons)

Payer Name & Mailing Address: _____



**I give permission for photos and/or videos of the student to be used for publicity purposes.
(Optional/Voluntary)**

Parent, Guardian, or Student (If over 18): _____ Date: _____

Signature

**I have read and agree to the terms of the Lesson Policies that have been provided to me, which includes the understanding that it is my responsibility and obligation to pay for all scheduled lessons as outlined in those Lesson Policies.
(Required to take lessons)**

Parent, Guardian, Payer, or Student (If over 18): _____ Date: _____

Signature