

PRIME TIME
MUSIC REGISTRATION FORM



START DATE OF MUSIC CLASS: _____

INSTRUMENT: _____

NAME: _____

GRADE: _____ HR: _____

SCHOOL: _____

CLASS INFORMATION:

DAYS ATTENDING: MON ___ TUES ___ WED ___ THURS ___ FRI ___

TIME OF CLASS: _____

Attends Prime Time After School: Yes No

Sibling attending Music Class: _____

DATE WITHDRAWN FROM CLASS: _____