



970 Pape Avenue, Toronto, Ontario M4K 3V7  
 416-425-9933  
[info@lippertmusic.com](mailto:info@lippertmusic.com) [www.lippertmusic.com](http://www.lippertmusic.com)

Office Use:	Entered
	1.
	2.

**GROUP AND THEORY CLASSES INFO & AGREEMENT**

Name of Course: \_\_\_\_\_ Day(s): \_\_\_\_\_ Time: \_\_\_\_\_ am/pm

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Male / Female

**MUSICAL EXPERIENCE:**

Private Lessons: No. of years: \_\_\_\_\_ Instrument(s): \_\_\_\_\_ Teacher: \_\_\_\_\_

Lippert Student: **Yes / No** If **yes**, years at Lippert \_\_\_\_\_ RCM Grade Level (if known): \_\_\_\_\_

Other Musical Experience: \_\_\_\_\_

Performance Experience: \_\_\_\_\_

Please indicate experience with the following: Group/Ensemble: **Yes/No** Stage: **Yes/No** Voice: **Yes/No**

Acting: **Yes/No** Dance: **Yes/No**

Please specify: \_\_\_\_\_

**GROUP CLASSES AGREEMENT**

- I agree that all missed lessons are charged and there are no make-up lessons for missed group classes regardless of notice.
- I agree that there are no refunds 2 weeks prior to the start of the course.
- I will pay in full for the class 2 weeks before the first lesson in order to secure my spot. A \$10.00 late fee for lesson payments arriving after the start of the course may apply.
- I agree to pay a \$30 charge for any NSF cheques.
- I understand and agree that any behaviour that limits the safety and enjoyment of other participants in a class or destroys equipment is not permitted. Should such a situation arise, participant may be removed upon a 2<sup>nd</sup> occurrence.
- For all **theory courses**, the student agrees to complete all assigned work on time. The student understands that not completing assignments may greatly affect the results of the examination at the end of the session.

STUDENT AND GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Release Statement**

“I hereby release and waive any claims which I, my child and ward have now or may have in the future against Lippert Music Centre Inc. and its servants, staff and employees from any and all liability for any loss, damage, expense or injury and arising in negligence or otherwise, howsoever caused, and which relate to the participation of my child or ward in any lessons, program(s) or classes. This release is binding upon my child or ward and upon their and my heirs executors and administrators, and I warrant that I have authority to enter into this release agreement on behalf of such child or ward.”

SIGNED: \_\_\_\_\_ DATED: \_\_\_\_\_

**OFFICE USE ONLY:** Registration Fee \$ \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_

OPTION #1: \$ \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_

OPTION #2: Term I (Sept-Dec) \$ \_\_\_\_\_ Term II (Jan-Mar): \$ \_\_\_\_\_ Term III (Apr-Jun): \$ \_\_\_\_\_ DATE: \_\_\_\_\_