

Harmony Road Music Center
Of Oregon
17300 SE 82nd Drive
Clackamas, OR 97015
www.harmonyroadoregon.com
503-557-5151

HRMC
ENROLLMENT FORM
New and Returning Students

Student's Name _____ Birth Date ___/___/___

Address _____ City/State _____ Zip _____

Parent/Guardian (if under 18) _____

Daytime Contact Name & Phone _____

Home Phone _____ Email Address _____

How did you hear about our school? _____

Musical instruments at home? _____

Previous musical experience? _____

STUDENT NAMED ABOVE IS ENROLLING IN THE FOLLOWING CLASS:

TODDLER TUNES 1__ 2__ MUSIC IN ME__ MORE MUSIC IN ME__

HARMONY ROAD 1__2__3__4__ YOUNG MUSICIAN 1__2__3__4__

KEYBOARD PREP 1__2__3__ KEYBOARD MUSICIAN 1__2__3__4__

PIANO____ PIANO STREET____ PARENT ORIENTATION____

1st Choice

DAY _____ TIME _____ STARTING DATE ___/___/___ TEACHER _____

2nd Choice

DAY _____ TIME _____ STARTING DATE ___/___/___ TEACHER _____

I, _____, acknowledge that I have received a copy of HRMC's Class and Financial Policies. I understand that I am responsible for reading the policies and I agree to comply with them. If I have any questions, I will contact the office staff.

I, ___ release ___ do not release photographs taken of my minor child/children by Harmony Road Music Center/Courses staff members. I understand that these photographs may be used for commercial advertising for Harmony Road Music Center of Oregon, Inc.

Parent/Guardian/Adult Student: _____ Date: ___/___/___