



**MUSIC CONNECTIONS Foundation, Inc.  
Fall 2010 Priority Registration**

OFFICE USE ONLY: **Bcm**

Date Received:  
Amount Received:  
Check No.:

PARENT NAME(S) \_\_\_\_\_ CAREGIVER'S NAME (if participating in class) \_\_\_\_\_

MAILING ADDRESS (Street or P.O. Box) \_\_\_\_\_ CITY \_\_\_\_\_

ZIP CODE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK OR CELL PHONE \_\_\_\_\_

Any physical limitations, medical conditions, special needs or concerns? \_\_\_\_\_

1<sup>st</sup> CHILD'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE AS OF 9/01/10 \_\_\_\_\_

**Form Type:** (check one)

Retaining current class: Day \_\_\_\_\_ Time \_\_\_\_\_  Level (curriculum change)

Requesting Schedule change (New day/time)  Brand New – adding sibling

**Name of Class Curriculum:** (circle one) *Village, Our Time, Imagine That!, Young Child Yr 1, Young Child Yr 2*

<b>1<sup>st</sup> Choice:</b>	<b>2<sup>nd</sup> Choice:</b>	<b>3<sup>rd</sup> Choice:</b>
Day: _____	Day: _____	Day: _____
Time: _____	Time: _____	Time: _____

2<sup>nd</sup> CHILD'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE AS OF 9/01/10 \_\_\_\_\_

**Form Type:** (check one)

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<b>1<sup>st</sup> Choice:</b>	<b>2<sup>nd</sup> Choice:</b>	<b>3<sup>rd</sup> Choice:</b>
Day: _____	Day: _____	Day: _____
Time: _____	Time: _____	Time: _____

**DISCOUNTS:**  Sibling (deduct \$10 from 2<sup>nd</sup> child's **tuition**)  3-Child Discount (deduct \$10 from each child's **tuition**)

Enrolling two siblings in the same class – sibling kit only (deduct \$30 from registration fee for second child)

Enrolling sibling of previously enrolled student in the current unit – sibling kit only (deduct \$30 from registration fee)

**PRIORITY REGISTRATION DISCOUNT** (Before May 21, 2010) \$10 will be deducted from fall tuition

**MATERIALS: Needed Child One:**  Full Materials -- Curriculum: \_\_\_\_\_  Sibling Kit Only -- Curriculum: \_\_\_\_\_

Materials with Backpack – New to Imagine That  Materials w/o Backpack – Returning to Imagine That

No materials-pay \$25 (produce mat'ls at 1<sup>st</sup> class)  Other \_\_\_\_\_ Curriculum: \_\_\_\_\_

**Materials Needed Child Two:**  Full Materials -- Curriculum: \_\_\_\_\_  Sibling Kit Only -- Curriculum: \_\_\_\_\_

Materials with Backpack – New to Imagine That  Materials w/o Backpack – Returning to Imagine That

No materials pay \$25 (produce mat'ls at 1<sup>st</sup> class)  Other \_\_\_\_\_ Curriculum: \_\_\_\_\_

**PAYMENT Options:**  **Payment in full** (Registration fee + Tuition - Discounts)

**Installment Plan** {(Registration fee (non-refundable)) due with registration form, half tuition due by September 16, 2010; balance due October 16, 2010.

**Customized Plan** {(Registration fee (non-refundable)) due with registration form with payments as determined by the studio.

3 PAYMENTS  5 PAYMENTS

**Credit Card Payment\*** Please go ONLINE to [www.kindermusik.com](http://www.kindermusik.com) to register and pay beginning May 17<sup>th</sup>!

**\*NOTE: If charging the Registration/Materials fee to your credit card, Kindermusik International will automatically charge the full tuition amount to your card the first week of the semester.**

**AMOUNT ENCLOSED:** \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Student 1                      Student 2                      Total

Please place your registration form and payment in the appropriate box outside the classrooms or mail to MUSIC CONNECTIONS FOUNDATION, Inc, 1108 Elmwood Rd., Bloomington, IL 61701. Questions? Call (309) 828-6806, email us at [musicconnections@comcast.net](mailto:musicconnections@comcast.net)