Trial Lesson Registration Form TomLee Music Academy



Program:	Te	eacher:	
Student:	Co	ontact Number:	
Email Address:			
Date:		Day:	
Time:	Payment method:	: Price:	
*Missed trial le *All payment n	on and no reschedule for paid essons will be charged and the nust be paid at the point of re	ere will be no makeup lessons	
Signature of Stu	udent/Parent/Guardian	Date	