

Geoffrey Johnson Oboe Studio



Student

Name: _____

Email: _____

Phone Number: _____

School: _____

Band Director: _____

Grade: _____

Parent

Name: _____

Email: _____

Phone Number: _____

Address: _____

Payments to lessons to be made the first lesson of each month in totality

Payments may be left in the mailbox if not home

Refunds given with one week notice of cancellation

Late fee of \$20 if not received within the first week of the month

Lessons are not cancelled due to snow days at school, but may be rescheduled if dangerous driving conditions

Parent Signature: _____ Date: ___/___/___