



I hereby give permission for my son/daughter
Class to attend private music lessons. I am aware that he/she will
be leaving class for half an hour each week.
I also understand that lessons must be paid for in full each Term, this includes any lessons missed due to absences / holidays etc.
Method of Payment: (please tick)
□ I will pay at each lesson
□ Please invoice me each school term
Signed (parent/guardian)
Date:
Could you please fill in your contact details below for my records
Parent/Guardian Name -
Address
Contact number -
E-mail address -