



MILLERGUITARACADEMY.COM

821 W. JEFFERSON BLVD. MISHAWAKA, IN . 46545 / 574-255-9343

Please read this **enrollment agreement** carefully. Fill it out and send it with a \$50.00 tuition deposit, which will be deducted from the full tuition.

STUDENT NAME _____

_____ circle M/F

PLEASE PRINT CLEARLY

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

BEEPER # _____ Email _____

(AGE 18 OR OVER) PLEASE PRINT CLEARLY

REFERRED BY: (check any) SIGN__FLYER__PHONE BOOK__WEB SITE__OTHER_____

MGA Student (name) _____

IF UNDER 18 please fill out the following :

BIRTH DATE Month _____ Day _____ Year _____ AGE _____

FATHER'S NAME _____ WORK PHONE _____

MOTHER'S NAME _____ WORK PHONE _____

Parents e-mail _____ (please include for MGA e-news)

PRINT CLEARLY

Please **cross out (X) all times that do not** fit your schedule, or **circle the time(s)** given by the instructor. **NOT ALL OF THE TIMES LISTED WILL BE AVAILABLE.**

Monday	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:35	7:10	7:45
Tuesday	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:35	7:10	7:45
Wednesday	3:00	3:30	4:00	4:30	5:00	5:30				
Thursday	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:35	7:10	7:45

{ } Check if you need to rent or purchase an acoustic guitar

THIS FORM IS AN AGREEMENT TO ENROLL THE ABOVE STUDENT FOR THE

_____ SEMESTER, _____ AT MILLER GUITAR ACADEMY.

Fall, Spring, Summer

Year

I UNDERSTAND AND AGREE TO ALL THE TERMS AND CONDITIONS OF THIS ENROLLMENT FORM. I AGREE TO PAY THE REMAINING TUITION AND CLASS MATERIALS FEES FOR THE SEMESTER INDICATED. I UNDERSTAND THAT THE \$50 DEPOSIT IS NON-REFUNDABLE UNLESS A CLASS TIME IS NOT AVAILABLE AT THE TIMES I'VE LEFT OPEN ON THIS FORM

SIGNATURE _____ DATE _____