

**Heartsong Family Enrichment**  
Enrollment Application

**STUDENT INFORMATION**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Special Concerns/Needs/Sensitivities/Allergies:

\_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_  
                                Number and Street                                City                                Zip

Phone number: Home \_\_\_\_\_ Other \_\_\_\_\_

E-Mail address: \_\_\_\_\_

**FOR PARENTS**

Parent (1) \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_

Parent (2) \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_

**I WOULD LIKE TO ENROLL MY CHILD/ MYSELF IN: \*Child (ch) / Adult (ad)**

Family Enrichment and Support \_\_\_ Private Piano (ch/ad) \_\_\_ Kindermusik (ch)\_\_\_ Group  
Piano (ch) \_\_\_ Theory Lessons (ch/ad) \_\_\_ Stage and Speech \_\_\_ (ch/ad)

**Le Voicery:** Private Voice (ch/ad) \_\_\_ Singer's Lab Group Voice (ch/ad) \_\_\_  
Singer's Laboratory Camp (ch) \_\_\_ Le Voicery Choir \_\_\_

**I WOULD LIKE TO PAY:** Monthly \_\_\_\_\_ Weekly \_\_\_\_\_

Students paying monthly are allowed one make-up session per month. Weekly-paying clients will be held financially responsible for non-emergency absences occurring without a 24-hour notice.

**A DEPOSIT EQUAL TO THE COST OF MATERIALS SECURES YOUR RESERVATION  
IN STUDIO LESSONS, CLASSES AND ENRICHMENT SESSIONS. PLEASE MAIL  
ENROLLMENT APPLICATION AND DEPOSIT TO:**

**Anitra Coulter Blunt  
P.O. Box 176  
Cedar Park, TX 78630**

Or send via email to **[anitra.coulter@gmail.com](mailto:anitra.coulter@gmail.com)**