

# THE GASSE SCHOOL OF MUSIC

Dr. Daniel Gasse & Sarah Gasse, Directors

7641 W. Polk Street

Forest Park, Illinois 60130

(708) 488-8117

www.gassesm.com

## Registration Form

Summer 2007

Sarah Gasse

Name of Student \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

Address (street, city, zip) \_\_\_\_\_

Telephone: Mother (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Father (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Student cell # \_\_\_\_\_ (optional)

Email: Mother \_\_\_\_\_ Father \_\_\_\_\_

Student \_\_\_\_\_ (optional)

School \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

6 Week Semester beginning June 11<sup>th</sup>

(Weeks of June 11, 18, 25, July 2, 9, 16 – Make-up week July 23)

1/2 Hour Violin/Viola Lesson \$180 \_\_\_\_\_

3/4 Hour Violin/Viola Lesson \$270 \_\_\_\_\_

1 Hour Violin/Viola Lesson \$360 \_\_\_\_\_

Teacher's Name: Sarah Gasse

Total Semester: \_\_\_\_\_

Please make checks payable to:

The Gasse School of Music

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