



Please fill out completely, check waiver box and sign in Parent Signature

Music Masters 2018 - 2019

Educating Lake County's Musical Children Since 1997

Class Location: Talent Forum – 450 Peterson Rd., Libertyville, IL 60048

To Register Call 847.573.1901, Email this form to info@musicinthebox.com

or Fax Registration with Credit Card Info to 847.557.1296

MM1: 11:00a-11:30a \$72 / MM2: 10:05a – 10:50a \$84 / MM3 9:15a – 10:00a \$84

Music Masters 1,2,3 – 6-Week Sessions: Fall 1, Fall 2, Winter 1, Winter 2, Spring & Summer

Fall 1: Sept 10-Oct 15

Fall 2: Oct 29 – Dec 10 (no 11/26)

Winter 1: Jan 7 – Feb 11

Winter 2: Feb 25 – Apr 7 (no 3/31)

Spring: Apr 14- May 18

Summer: Jul 7– Aug 4 (no 7/2)

1 st Student Name, First and Last (Please list only one child here)		Date of Birth (MM/DD/YR)	
2 nd Student Name, First and Last (Please list only one child here)		Date of Birth (MM/DD/YR)	
3 rd Student Name, First and Last (Please list only one child here)		Date of Birth (MM/DD/YR)	
Parent Name, First and Last		Home or Cell #	
City, State & Zip		Email:	
Physical Limitations or Concerns Instructor Should Know:		Emergency Contact Name & Phone #	
New Students Only:			
How did you hear about Music-in-the-Box? <input type="checkbox"/> Referral <input type="checkbox"/> Past Class <input type="checkbox"/> Social Media <input type="checkbox"/> Website / Google Search			
<input type="checkbox"/> Newspaper Article <input type="checkbox"/> Other			
CLASS TYPE (Please specify Music Masters 1, 2, 3 or 4)	SESSION (Fall 1, Fall 2, Wtr1, Wtr 2, Spr, Sum)	DAY OF CLASS (Tuesday MM1, 2, 3)	FEE (MM3, MM2 - \$84 / MM1 - \$72)
<input type="checkbox"/> Waiver/Release: I hereby release Music-in-the-Box, Inc and Talent Forum and its agents and employees from all liability and personal injury, illness or property damage occurring on or off Talent Forum premises. I understand that injuries are a natural possibility in any athletic/movement endeavor and will assume full responsibility for any injuries incurred during any Music-in-the-Box functions, except in cases of gross negligence or willful misconduct on the part of any Music-in-the-Box, Inc affiliate. I have read the registration information and understand Music-in-the-Box, Inc or Talent Forum policies as outlined and give permission to contact rescue squad if instructor deems necessary. I certify that my child(ren) is/are in good health and capable of participating in all Music-in-the-Box, Inc activities and classes. I hereby give permission to Music-in-the-Box and Talent Forum to take photographs for promotional use for the program.		Private Reg Subtotal	
		-\$6 MM1 or -\$8 MM2/3 Semester Discount Per Student	
		Total Due	
		MITB USE: Payment Type _____ Enter Ck # _____	<input type="checkbox"/> Credit Cd <input type="checkbox"/> Cash/Gift Cert <input type="checkbox"/> Check

Parent Signature:

Date: ___/___/___

Credit Card Number: _____	City / Zip Code Of Cardholder: _____
Exp: ___/___	CVS: _____
Printed Name and Signature of Credit Card Holder if different from above. (Credit Card Numbers are shredded after approval.)	