



mode music and performing arts

3801 Delridge Way SW Seattle, 98106

CLASS REGISTRATION FORM

Parent/Guardian Name:		New Address? Yes <input type="checkbox"/> No <input type="checkbox"/>	New to MMPA? Yes <input type="checkbox"/> No <input type="checkbox"/>
Address:		Primary Phone:	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
City:	Zip:	Secondary Phone:	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
All information will be delivered to you by e-mail. Please provide us with the e-mail address(es) that you check regularly:		E-MAIL	

1) Student's Name :		Birth date:	Gender:
		Grade This Year:	
Class/Workshop Title	Class Code	Tuition	
		Total:	

2) Student's Name:		Birth date:	Gender:
		Grade This Year:	
Class/Workshop Title	Class Code	Tuition	
		Total:	

Payment Policy: Full tuition is due at the time of registration. We will not process your payment until the class has met its minimum enrollment. Our registrar will advise you when class is a "go" (or cancelled) and we will then process payment or shred your payment information.

After School Class and Workshop Withdrawal and Refund Policy

If class cancelled by MMPA: Full refund.

Drop before 1st class: Full refund, less \$25.

Drop after 1st class: You will be charged the value of one session of class plus \$25. The balance will be refunded or may be held as a credit which expires one year from the start date of the class for which you registered.*

Drop after 2nd class: You will be charged the value of one session of class plus \$25. The balance will be refunded or may be held as a credit which expires one year from the start date of the class for which you registered.*

Drop after 3rd class: No refund, but 50% of remaining class tuition will be held as a credit which expires one year from the start date of the class for which you registered.*

*We offer a satisfaction guarantee on all of our classes and workshops. Please email info@modemusicandperformingarts.org with any questions/concerns.

I have read and accept this policy. Signature:

Please Charge my card in the amount of:	I have enclosed a check in the amount of:
VISA <input type="checkbox"/> MC <input type="checkbox"/> DISC <input type="checkbox"/>	Credit Card Number:
Name on Card:	Exp Date:
Billing address if different from the address above:	