

**Lighthouse Youth Arts Center**  
**Private lesson Registration Form**  
Please fill out all the information below: (print clearly)

Student \_\_\_\_\_ Age \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date: \_\_\_\_\_ Email (needed to complete registration):  
\_\_\_\_\_

Phone:( ) \_\_\_\_\_ Work:( ) \_\_\_\_\_

Cell 1:( ) \_\_\_\_\_ Cell 2:( ) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ PH. \_\_\_\_\_

Please circle all that apply:

**I am interested in private lessons for:** Voice Acting Dance Piano Guitar

**Rules of YAC:**

- 1.) I will have payment by the first class or first rehearsal. **Student Initial** \_\_\_\_\_
- 2.) I understand that I am responsible for discarding any garbage I may have into the proper garbage receptacles. **Student Initial** \_\_\_\_\_
- 3.) Eating and drinking in designated areas only. **Student Initial** \_\_\_\_\_
- 4.) I will respect other students by being quiet in lobby as to not disrupt classes in session. **Student Initial** \_\_\_\_\_
- 5.) I will be completely quiet when walking into the first studio to either buy refreshments or go to the next studio when a class is in session.  
**Student Initial** \_\_\_\_\_
- 6.) (Only applies to those in a production) I may not miss more than two rehearsals per production and cannot miss **any** technical rehearsal. If more than two rehearsals are missed I may be asked to leave the production.  
**Student Initial** \_\_\_\_\_
- 7.) To be respectful to the instructors by: **Student Initial** \_\_\_\_\_
  - a.) To be on time and prepared for class
  - b.) Listening and learning from the instructor
  - c.) Talking at appropriate times during class

**This is a non-refundable program**

# Lighthouse Youth Arts Center Private lesson Registration Form

## **Late Pick-up Policy:**

The Studio is not responsible for students after the scheduled hours of operation. If the staff needs to wait with a student for more than 15 minutes after the Studio's scheduled hours for their parent or guardian to arrive, there will be a late fee of \$1 per minute charged to the member's credit card at the end of each month.

I understand that the Studio is not to be used as a babysitting service and while I am at the facility I am to be participating in a scheduled YAC class, lesson or rehearsal.

## **Payment Policy:**

I understand that my payment is to be paid in full directly to the studio. Cash or check payable to LYT is to be submitted before the private lesson has occurred. We do not accept credit cards for one lesson at a time, but if you wish to use a credit card to pay for lessons you can purchase a block of either 5 or 10 lessons to be charged to your card. I further understand that my failure to attend a private lesson without written, phone or email notice before 10 AM the day of the lesson will not relieve me of my obligation to pay for the private lesson.

**Student Name (please print):** \_\_\_\_\_

**Student Signature (18 years or older)** \_\_\_\_\_

**Parent/Guardian Name (print):** \_\_\_\_\_

**Parent/Guardian (signature)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This is a non-refundable program**