



By mail:  
Community Music School  
PO Box 2503  
New Westminster, BC V3L 5B2



By phone: 604-527-5469  
(MasterCard & VISA only)  
By fax: 604-527-5528  
(MasterCard & VISA only)



In person:  
700 Royal Ave  
Room 3200A (3rd Floor N)  
Mon-Thurs, 3-7pm

## Community Music School Registration and Receipt

Date \_\_\_\_\_  
*day/month/year*

Student #1 \_\_\_\_\_

Student #2 \_\_\_\_\_

Student #3 \_\_\_\_\_

Parent (if student(s) under 16 years) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Business) \_\_\_\_\_

Have you attended Community Music School before? Yes  No

If yes, has your address changed since you last registered? Yes  No

OFFICE USE ONLY			
Receipt #	_____		
Comp <input type="checkbox"/>	Post Date <input type="checkbox"/>	Dep <input type="checkbox"/>	
Amt \$	_____ Payroll <input type="checkbox"/>		
J	F	M	A
M	J	J	A
S	O	N	D

### COURSE INFORMATION

Student #1 Course \_\_\_\_\_ Instructor \_\_\_\_\_  
Fee \$ \_\_\_\_\_ Start Date \_\_\_\_\_ Room \_\_\_\_\_ Time \_\_\_\_\_

Student #2 Course \_\_\_\_\_ Instructor \_\_\_\_\_  
Fee \$ \_\_\_\_\_ Start Date \_\_\_\_\_ Room \_\_\_\_\_ Time \_\_\_\_\_

Student #3 Course \_\_\_\_\_ Instructor \_\_\_\_\_  
Fee \$ \_\_\_\_\_ Start Date \_\_\_\_\_ Room \_\_\_\_\_ Time \_\_\_\_\_

### PRIVATE LESSON INFORMATION (check all terms that apply)

**Student #1** Instrument \_\_\_\_\_ Instructor \_\_\_\_\_  
Term Fall  Winter  Spring  Summer  Day \_\_\_\_\_ Time \_\_\_\_\_  
Lesson Duration 30 min  60 min  Lesson Card  Fee per term \$ \_\_\_\_\_

**Student #2** Instrument \_\_\_\_\_ Instructor \_\_\_\_\_  
Term Fall  Winter  Spring  Summer  Day \_\_\_\_\_ Time \_\_\_\_\_  
Lesson Duration 30 min  60 min  Lesson Card  Fee per term \$ \_\_\_\_\_

**Student #3** Instrument \_\_\_\_\_ Instructor \_\_\_\_\_  
Term Fall  Winter  Spring  Summer  Day \_\_\_\_\_ Time \_\_\_\_\_  
Lesson Duration 30 min  60 min  Lesson Card  Fee per term \$ \_\_\_\_\_

### PAYMENT INFORMATION – Payment must accompany registration, including post-dated cheques

Are you paying monthly? If yes, monthly fee \$ \_\_\_\_\_ (See brochure or Web site for monthly payment dates.)

Cash  Interac  Cheque(s)  (payable to Douglas College) M/C  VISA  Card # \_\_\_\_\_ Expiry \_\_\_\_\_

(If paying monthly) I authorize Douglas College Community Music School to charge monthly payments as detailed above to my credit card on the first day of each month, for the duration of the terms indicated.

Signature \_\_\_\_\_

All fees must be paid in full before instruction commences. NSF cheques are subject to an additional charge of \$20. Refunds are available for those withdrawing from a course or private lessons only by written request received a minimum of five working days before the start of the course/lesson. Withdrawals are subject to a \$15 non-refundable administration fee. In the case of group classes, no refund can be issued once a course has started.

### CANCELLATIONS

Full refunds will be made automatically if the Community Music School cancels a course. Private lessons or classes cancelled by the instructor will be rescheduled. There is no obligation to reschedule private lessons cancelled by the student, although the instructor may do so at his/her discretion if adequate notice is given.

### RETAIN THIS RECEIPT FOR INCOME TAX PURPOSES; NO OTHERS WILL BE ISSUED.

Under certain conditions, tuition fees may be claimed as an income tax credit. Please check with Revenue Canada to determine eligibility. It is hereby certified that the above-named person was enrolled as a student at this educational institution, that the tuition fee is in respect of the above session and is the amount deemed to qualify as a tuition fee under the Income Tax Act, and that no part of the above tuition fee was levied in respect of any charges other than fees for tuition.