Platform C

Muziek- en Dansschool Amstelveen

Kunstuitleen Amstelveen, Volksuniversiteit Amstelland en Muziek- en Dansschool Amstelveen zijn nu samen Platform C

Administration dept.
Stadsplein 99
1181 ZM Amstelveen
tel. : 020 - 6471457
fax. : 020 - 6404933

REGISTRATION / CHANGE FORM

Student No.

(New) student particulars

SURNAME _____ **INITIALS** _____

FIRST NAME _____ **M/F** **DATE OF BIRTH** _____

ADDRESS _____ **POSTCODE** _____

PLACE _____ **TELEPHONE NO** _____

E-MAIL ADDRESS _____ **2nd TEL/MOBILE** _____

NAME (primary) SCHOOL _____ **GROUP/FORM** _____

Not available for lessons on:
- ❑ Mondays
- ❑ Tuesdays
- ❑ Wednesdays
- ❑ Thursdays
- ❑ Fridays
- ❑ Saterdays

Please do not use the space below (admin.)

Would like to REGISTER for the following course(s):

COURSE _____ **AND/OR*** _____

CHOIR (group 3 and higher) YES/NO*

KIND OF TUITION: (in case of instrumental lesson, see backside for explanation)

- ❑ basic
- ❑ basic + 1 star
- ❑ basic + 2 stars
- ❑ basic + 3 stars
- ❑ basic + 4 stars
- ❑ basic + 5 stars
- ❑ basic + 6 stars

Wishes to CANCEL the following course(s):

COURSE _____ **AND/OR*** _____

Reason: _____

in PC

MUSICAL BACKGROUND for new students)
- ❑ has never taken any music classes
- ❑ is taking / used to take music classes elsewhere, i.e. _____
- ❑ was a student at the Music and Dance School several years ago for:

COMMENTS:

Payee's particulars: disp.no.

NAME _____ **M/F** **BANKNO.** _____

ADDRESS/TELEPHONE _____
(In the case this differs from the above

Desired payment (please tick)
- ❑ within 14 days upon receipt of invoice
- ❑ in 3 instalments (1: upon receipt of invoice, 2: from December, 3: from February)

Holds an Amstelveen pass **YES / NO*** (If yes, please hand in a copy to the administration dept.)

Registration is effective for **ONE FULL SCHOOL YEAR** running from August 1st up to and including July 31st. If the course is not cancelled with the director by **MAY 1st IN WRITING**, the registration will continue for the subsequent school year.
The undersigned declares to be familiar with the TUITION FEE RATES and the TERMS OF TUITION and to guarantee payment of the fees due.

Date _____ Signature _____

* please delete whichever is not applicable