

## Saint Hildegard Music Studio -- Registration Form

Student's Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Sex: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_\_

Names of Parents'/Guardians' \_\_\_\_\_

Home Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Primary Cell (blank if same): \_\_\_\_\_

Email: \_\_\_\_\_

### *Studio Policy and Expectations Agreement*

I, \_\_\_\_\_, have read and agree to follow the Studio Policies and Expectations.  
Parent/Guardian Signature and Date: \_\_\_\_\_

### *Studio Photography Release Statement*

The studio will rarely use photos or video recordings of students for various purposes in lessons.  
I, \_\_\_\_\_, give permission to have pictures/recordings of \_\_\_\_\_  
taken and used by Saint Hildegard Music Studio for instructional purposes.  
Parent/Guardian Signature and Date: \_\_\_\_\_

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*This following section is for the student to fill out. You may write their answers for them.*

My school: \_\_\_\_\_ My grade: \_\_\_\_\_

My favorite color: \_\_\_\_\_ My favorite food: \_\_\_\_\_

My hobbies: \_\_\_\_\_

My favorite subject in school is: \_\_\_\_\_

If I could be anything when I grow up, I would be: \_\_\_\_\_

My siblings are: \_\_\_\_\_

My pets are: \_\_\_\_\_