



nemasboard@gmail.com 780-646-0846

REGISTRATION FORM 2021/2022

September - May (No classes during Christmas or Spring Break)

STUDENT INFORMATION (Please print clearly)

LAST NAME: _____ FIRST NAME: _____ MIDDLE NAME: _____

ADDRESS: _____ CITY: _____ PROVINCE: _____ POSTAL CODE: _____

DATE OF BIRTH: _____ HEALTH CARE #: _____ GENDER: _____

HEALTH CONCERNS: _____

TYPE OF LESSONS: Tuesday - Guitar PREFERRED TIME: (between 3:30pm - 9:00pm) _____ YEARS OF EXPERIENCE: _____

TYPE OF LESSONS: Violin - Wednesday PREFERRED TIME: (between 1:30pm - 7:30pm) _____ YEARS OF EXPERIENCE: _____

(Please circle type of lesson & preferred day of week)

CONTACT INFORMATION (Parent information if student is under the age of 18)

MOTHER: LAST NAME: _____ FIRST NAME: _____

FATHER: LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____ PROVINCE: _____ POSTAL CODE: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

HOME EMAIL: _____ ALTERNATE EMAIL: _____

NEMA's main form of communication is by email, please provide a primary email address that is current

EMERGENCY CONTACT

NAME: (other than above): _____ RELATIONSHIP: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

VOLUNTEER DUTIES Please select 1 event to help with. If selecting a board position & elected at the annual AGM - this will count towards your duties.

** 1 non-dated volunteer cheque per student \$100 (max 2 per family)

Board Positions: President _____

Community Awareness _____

Vice President _____

Christmas Concert _____

Treasurer _____

Spring Concert _____

Secretary _____

* NEMA is scheduled to work a casino in Fort McMurray in the near future
Each family is responsible to volunteer or find a volunteer to work on their behalf

Casino/Volunteer Coordinator _____

13 volunteers will be needed

ENROLLMENT REQUIREMENTS AT THE TIME OF REGISTRATION

This application is hereby made to enroll the above named student in the North Eastern Music Association to receive private lessons. The student may also receive group lessons, concert activities, and workshops initiated or sponsored by NEMA. Private lessons are 30 minutes long at \$25 per lesson. Please inquire with NEMA if you are looking for longer lessons times.

PLEASE NOTE: Signing this registration form commits the student for the duration of the teaching year. If a student cancels a lesson, refunds will not be provided. If a teacher cancels a lesson it will be rescheduled or refunded at NEMA's discretion.

In order to be enrolled, NEMA must receive post-dated cheques for one of the following payments options: (choose 1 option)

_____ Option 1 - Full payment due prior to term 1 start date Start Date: _____
*Term 1 - 15 lessons x \$25/30 min lessons = \$375.00
*Term 2 - 17 lessons x \$25/30 min lessons = \$425.00
* NEMA Family Membership Fee = \$25.00
Total = \$825.00

Plus 1 non-dated \$100 volunteer cheque

_____ Option 2 - Payment by term Start Date: _____
*Term 1 - 15 lessons x \$25/30 min lessons = \$375.00
* NEMA Family Membership Fee = \$25.00
Total = \$400.00 - Due prior to term 1 start date

*Term 2 - 17 lessons x \$25/30 min lessons = \$425.00
Total = \$425.00 - Due prior to term 2 start date

Plus 1 non-dated \$100 volunteer cheque if not previously provided

Payment received by: _____ Date: _____
(MUST BE BOARD MEMBER)

Volunteer Cheque #: _____ Date returned: _____

**** NO REFUND WILL BE PROVIDED AFTER 3 LESSONS HAVE BEEN COMPLETED ****

****** \$25 NEMA Membership Fee is non-refundable ******

I have read and agree to the terms above:

Signature of student or parent/guardian: _____ Date: _____

PRIVACY CONSENT

NEMA is collecting student and household personal information under the authority of PIPA. This information may be shared with NEMA's executive board members & instructional music teachers for the purpose of administrating the music programs, practices, events, scheduling volunteer workers, and any events related to the aforementioned activities.

In addition, student's name, age and image-may be used by NEMA for promotional purpose, including display during events and during concerts. Furthermore, the personal information, including your telephone number, may be distributed to the volunteer coordinator for NEMA to facilitate duties

I HEREBY CONSENT to the collection of the above personal information to be used by NEMA for the above stated purposes and to be disclosed to the persons or public in the manner herein described.

Signature of student or parent/guardian: _____ Date: _____