

## OSM Registration Form for Summer 2011 (June 20-Aug 19)

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ New to OSM? Y N

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ New to OSM? Y N

Parent Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone /day: \_\_\_\_\_ evening: \_\_\_\_\_ cell: \_\_\_\_\_

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

Additional Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### CAMP/CLASS Selection:

Student Name	Class/Camp Name, Date, Time, Location	Cost
_____ / _____	_____	\$ _____
_____ / _____	_____	\$ _____

### PRIVATE LESSON SAMPLER Selection:

Student Name	Instrument	# Lessons	Teacher
_____ / _____	_____	_____	_____
_____ / _____	_____	_____	_____

**Flexible Schedule (June 21-Aug 22):** Lesson times will be set by student and teacher.

Weeks NOT available: \_\_\_\_\_ Days/Times NOT available: \_\_\_\_\_

**Please check Private Lesson option with flexible schedule:**

# Lessons	Cost
30 min / \$26.25 per lesson or SPECIAL 8 Lesson Package = \$206:	_____ \$ _____
45 min / \$38.25 per lesson or SPECIAL 8 Lesson Package = \$302:	_____ \$ _____
60 min / \$50.75 per lesson or SPECIAL 8 Lesson Package = \$400:	_____ \$ _____

30 min / \$26.25 per lesson or SPECIAL 8 Lesson Package = \$206: \_\_\_\_\_ \$ \_\_\_\_\_

45 min / \$38.25 per lesson or SPECIAL 8 Lesson Package = \$302: \_\_\_\_\_ \$ \_\_\_\_\_

60 min / \$50.75 per lesson or SPECIAL 8 Lesson Package = \$400: \_\_\_\_\_ \$ \_\_\_\_\_

**Camp and / or Private Lesson Total** \$ \_\_\_\_\_

**Student Registration Fee for Summer 2011\* = \$10 per student** \$ \_\_\_\_\_

**Extended Care:**  8:00-9:30am \$45wk /  3-4:30pm \$50wk per student \$ \_\_\_\_\_

\*\$10 Summer Reg.Fee for students new to OSM in Summer 2011 **Total:** \$ \_\_\_\_\_

This fee will qualify student as "Returning Student for 2011-12 OSM Fall Registration"

**Payment-Credit:** VISA/MC# \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Registrations with credit card payment may also be made by fax 410-309-0774**

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Payment-Check :** Amount: \$ \_\_\_\_\_ Please make checks payable to "OSM"  
then mail along with form to: OSM 9520 Berger Road, Suite 104, Columbia, MD 21046

**Refund Policy:** Refunds are granted for voluntary withdrawals at the following percentages of the total cost (less \$25 processing fee): Before May 1=100%; May 2 to May 15 =75%; May 16 to June 1=50%; after June 1= 50.% refunds less \$25 processing fee are granted only if student is injured, ill, or moves away from the area. Written documentation required.

# Make it a Musical Summer!

**Camps  
Classes  
Lessons**

**for All  
Ages!!**



**Year-Round Music Education**

**410-309-0770**

**www.OlenkaSchoolofMusic.com**

## Important Notes for Parents

- Parents should call OSM if their child will be missing a day of camp for any reason.
- All snacks and lunches should be "peanut-free."
- Mark the inside of your child's lunch container with his/her name.
- Please advise OSM if your child has any special needs so we may work with you to provide the best experience possible.
- OSM staff will not change diapers. Please provide an extra set of clothes for young children.
- Before/After Care must be paid in full before the start of the camp week. Late pick-ups will be charged \$5 per 10 min. Before/After Care may be arranged on a per-day basis with 24hrs prior notice at a minimum charge of \$15 for a.m. and \$15 for p.m. slots.