

# REGISTRATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

Hm Ph: \_\_\_\_\_ Wk Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

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

Select The Class:

- Guitar Class I
- Guitar Class II
- Popular Guitar Class

Start Date:    /    /

Comments / Concerns: