



Registration Form

To enroll, call **592-6906** or mail this form along with your payment to:
Joyful Sounds, Inc.
1509 Beechwood Ave
Papillion NE 68133



Child's Name _____ Date of Birth ___/___/___

Parent or child giver name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell or work phone _____

E-Mail _____ Allergies or other concerns? _____

How did you hear about us? _____ Referred by _____

Prices are per 15-week semester unless indicated otherwise

- Village** (1-18 months) \$105 (8 weeks) Tues 11:30-12:10; Thurs 6:40-7:20 pm (pajama class); Sat 9-9:40
- Sign & Sing** (6 mo to 3 years) \$160 (10 weeks) Thurs 12:30-1:15
- Our Time** (18 months to 3 1/2 years) \$205 Wed 10-10:45; Wed 7:05-7:50 (pajama class) Thurs 10:15-11:15; Sat 10-10:45
- ABC Music & Me** (3 1/2 -6 years) \$160 (12 weeks) Mon 10:30-11:15; Mon 5:40-6:25 pm
- Imagine That!** (3 1/2 -5 years) \$205 Mon 9:30-10:15; Tues 12:30-1:15
- Family Time** (infant to 7 years) \$205 Tues 7-7:45 (pajama class); Sat 11-11:45
\$75 each additional child
- Young Child, Year 2** (5 - 7 years) \$410 (30 weeks) Tues 5:45-6:45

Class: _____ 1st Choice day/time _____ 2nd Choice day/ time _____

Registration deadline to receive materials at first spring lesson -- Jan 5. Registrations are accepted throughout the year and will be prorated as needed.

Payment Options: Prices listed above are for one child. Sibling discounts available as indicated. Note: Payment is due in full regardless of number of classes attended.
Option 1: Pay in full with registration -- save \$5
Option 2: Pay in monthly installments, \$70 due with registration
____ I am enrolling siblings in the same class ____ I have all the semester materials from a previous enrollment.

PAYMENT OPTION: ____ 1 (Full payment) ____ 2 (Installments)

PAYMENT METHOD ____ Check (Payable to Joyful Sounds Inc), ____ Cash , ____ Paypal (to **kmpapio@cox.net**)

With this enrollment, I release any and all rights and claims for damages against Joyful Sounds Inc and its staff in the unlikely event of injury sustained by myself or my child(ren) during the course or as the result of this musical activity.

____ You have my permission to send me class-related emails.

____ You have my permission to use photos or video taken of my child during class.

Signed _____ Date _____