

Betty Smith's Music Studio  
REGISTRATION FORM for 2024-2025

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

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

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

Phone: (Home) \_\_\_\_\_

(Work) \_\_\_\_\_

(Cell) \_\_\_\_\_

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

Parents' Names: \_\_\_\_\_

Student Birthday (Month, Day, and Year): \_\_\_\_\_

Student Age/Grade as of 6/1/2024 \_\_\_\_\_ / \_\_\_\_\_

Age

Grade

Lesson Length Requested:

\_\_\_\_\_ 30 min \_\_\_\_\_ 45 min \_\_\_\_\_ 60 min \_\_\_\_\_ 75 min

Day of Week/Time Request **FOR SCHOOL YEAR:** (Begins Aug 26)

Please check requested summer weeks: (6 weeks included in tuition)

\_\_\_\_\_ June 10-14 \_\_\_\_\_ July 8-10 (M-W only) \_\_\_\_\_ Aug 12-16

\_\_\_\_\_ June 17-21 \_\_\_\_\_ July 25-26 (TH-F only)

\_\_\_\_\_ June 24-28 \_\_\_\_\_ July 29-Aug 2

\_\_\_\_\_ July 1-3, 5 \_\_\_\_\_ Aug 5-9

Day of Week/Time Request **FOR SUMMER:** (June 10 – Aug 16)

\$35 enrollment fee required per child for registration. Please include fee with this form and return to:

Betty Smith  
[bsmithmusicstudio@gmail.com](mailto:bsmithmusicstudio@gmail.com)  
19065 West 115<sup>th</sup> Terrace  
Olathe, KS 66061  
913-492-0083

\_\_\_\_\_ YES \_\_\_\_\_ NO "I want to be included on the 2024-2025 SWAPS list"