

Evergreen Studio of Music & The Arts (ESOMA)

2860 Aborn Road, San Jose, CA 95135
(408) 223-1888, www.evergreensoma.com

REGISTRATION FORM

Programs: (check all that apply)

<input type="checkbox"/>	Piano	<input type="checkbox"/>	Violin	<input type="checkbox"/>	Theatre/Acting
<input type="checkbox"/>	Guitar	<input type="checkbox"/>	Voice	<input type="checkbox"/>	Others: _____

Student Information: New Student: _____ Old Student: _____

Name: _____

Street Address: _____

City: _____ State: CA Zip: _____

Date of Birth: _____ Age: _____

School: _____ Grade: _____

Parent / Guardian Information:

Name: _____

Street Address: _____

City: _____ State: CA Zip: _____

Home Ph.: _____ Work Ph.: _____ Cell Ph.: _____

Email: _____

Emergency Contact Information:

In case of emergency and neither parent of guardian can be reached, please list any or all relative/s or friend/s we may contact: (use back of the form for additional information)

Name: _____

Home Ph.: _____ Work Ph.: _____ Cell Ph.: _____

Insurance / Medical Information:

Company Name / Plan: _____

ID or Account No.: _____

Primary Care Doctor: _____

Doctor's Ph.: _____

Medical Issues or other info ESOMA should know about your child: _____

Complete & mail this form to **Evergreen Studio of Music & The Arts (ESOMA)**. If new student, please send a check to cover the non-refundable \$20 registration fee.

Parent/Guardian Signature, Date

Student Signature (over 18), Date