



FALL 2018 REGISTRATION

Child's **FULL** (first and last) Name _____ Date of Birth(D/M/Y) _____

Mother's and Father's Full Names _____

Address _____

Post Code, City _____

Home Phone _____ Cell Phone(s) _____

e-mail _____

Family Time (Babies to 6-year-olds) (please state first and second preferences)

Saturdays: 10:15-11:00 _____ **Thursdays: 10:30-11:15** _____

Classes will be held on:

Saturdays: September 1 8 15 22 29 October 20 27
November 3 10 17 24 December 1 January 12 19

Thursdays: September 6 13 20 27 October 18 25
November 1 8 15 22 29 December 6 January 10 17

Classes will be held at the: **Kindermusik Studio - Leimgrubenweg 9 – at Dreispitz - 4053 Basel**

FEES:

Home Materials (non-refundable) **Fr. 75** and Tuition **Fr. 350** for the 14-week semester.
Total with single child: **Fr. 425** Second child's tuition (same family): **Fr. 175** Third child: **Fr. 75**

Please pay all fees by the second week of class. Tuition refunds may be requested due to a family move or illness necessitating withdrawal from class, and will be discussed on a case by case basis. Home Materials, once received, are non-refundable. The educator will be Elizabeth Bazin.

I wish to register my child(ren) for **Kindermusik Family Time** classes.

Date _____ Parent's Signature _____



Please E-MAIL this form to: kidsmusic.ch@hotmail.com

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www.kidsmusic.ch