

Upside-Up® Music

MUSIC TOGETHER® – KIDS' JAM - REGISTRATION FORM

Lui Collins, Director – 137 Main Street Apt C, Shelburne Falls, MA 01370-1167; (413) 628-0197

Please fill out this form completely and mail with a check made out to Upside-Up Music to:

Upside-Up Music, 137 Main Street Apt C, Shelburne Falls, MA 01370-1167

Program you're registering for: Music Together Kids' Jam
Parent/Caregiver's name(s): _____

Mailing address: _____

City/town: _____ State: _____ Zip code: _____

Phone: (____) _____ 2nd Phone: (____) _____

Email address: _____

1st child: _____ Date of birth: ____/____/____

2nd child: _____ Date of birth: ____/____/____

3rd child: _____ Date of birth: ____/____/____

Please indicate your first and second choices of time and location. Please check website for times offered this semester:

Music Together:

___ Shelburne Falls; Tuesday, first choice time: _____ second choice time: _____

___ Jacksonville, VT; Tues/Wed, first choice day/time: _____ second choice day/time: _____

___ Ashfield; Wednesday, first choice time: _____ second choice time: _____

___ Williamsburg; Thursday, first choice time: _____ second choice time: _____

Kids' Jam Family Music Workshop:

___ Jacksonville, VT; Tues/Wed first choice day/time: _____ second choice day/time _____

___ Ashfield; Wednesday, time: _____ Circle: 1st choice or 2nd choice

___ Williamsburg; Thursday, time: _____ Circle: 1st choice or 2nd choice

Please check the box for the session you're enrolling your child(ren) in:

Spring – 10 weeks, April – June Summer – 6 weeks, June/July - August

Fall – 10 weeks, September – December Winter – 10 weeks, January – March

See website for tuition cost. Be sure to add new family registration fee if this is your first class with Upside-Up, and late fee if applicable.

Total payment \$ _____ Check Enclosed (payable to Upside-Up Music)

For class dates and other details about classes and/or tuition, or for directions to class locations, please see UpsideUpMusic.com