

EMA Registration Form 2023 - 2024

Student Name _____

Date of Birth _____

Student: #/text _____

Student Email: _____

Parent Name(s): _____

Parent: #/text _____

Parent Email: _____

Address: _____

Desired Course: _____

Desired Teacher: _____

• Due to the size of the studio and resulting scheduling limitations, make-ups for student absences will be limited to two per semester - no exceptions. In the event that Dr. Esch cancels lessons, a time within the semester in question will be mutually agreed upon to make up the lesson

• Students with any cough, sore throat, runny nose, fever etc. must stay home for an online lesson. Please inform Dr. Esch of this change a minimum of 2 hours prior to the lesson to receive a Zoom link.

I have read and agree to statements above.

Student Signature:

Parent Signature:
