



Vocal Zone Voice Studios™

Commitment Contract 2010-2011

_____ commits to taking regularly scheduled voice lessons from _____ to _____.

Based on this time frame, my quarterly rate is: \$_____.

I understand that my lesson time/day on _____ will be reserved for me and only me, and that lessons will not be made up if I do not come to my scheduled lesson, regardless of reason or advanced notification.

I have read and understood the policies and procedures for voice lessons. By signing this commitment contract, I agree to adhere to these policies and procedures set forth by Vocal Zone Voice Studios regarding payment procedures, scheduling lessons and expected preparation for lessons throughout the duration of my contract.

Student Signature

Date

Guardian Signature

Date

Personal Information

Student Name: _____ (Guardian Name): _____
Print Neatly

Birthdate: _____ (Grade): _____ School/Work: _____
Month, Day, Year

Voice Type: _____ Singing/Music Involvements: _____

Address: _____ City _____ State _____ Zip _____

Phone Number:(____) _____ Cell:(____) _____

STUDENT'S EMAIL: _____ (PARENT'S EMAIL): _____
(VZVS depends upon email addresses for constant communication. Please make sure you provide an email address which is frequently checked.)

Hobbies/Sports/Music Background/Favorite color/Other Involvements:

Please tell me in a few words what you wish to achieve by taking voice lessons:
