



## Autism Course Registration Form

To register, please return this sheet along with payment to Kelly Fowler, MA, MT-BC at West Music Company, 4305 44<sup>th</sup> Ave., Moline, IL 61265, 309-764-9300, no later than **February 11, 2010**.

Please send payment with registration form. Students will not be considered registered until payment is received. All payments are non-refundable.

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Contact person (& relationship): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount due (nonrefundable)-\$90.00: \_\_\_\_\_  Payment is enclosed

*All Classes will be held at the West Music store, 6322 University Avenue, Cedar Falls, IA*

### Payment Method:

Cash (enclosed)

Check (make payable to WEST MUSIC)

Credit Card



Card Number:

Expires:   /

Name on card: \_\_\_\_\_  
(Exactly as it appears on your card)

Signature: \_\_\_\_\_  
(Required when using credit card)