



Autism Course Registration Form

To register, please return this sheet along with payment to
Lucy Schipper, MT-BC at West Music Company, 6322 University Ave., Cedar Falls, IA 50613,
319-277-1000, as soon as possible to secure a spot in the class or on the waiting list.

Please send first monthly 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: _____

Email address: _____

Amount due (nonrefundable)-\$15.00 per session: _____ Payment is enclosed

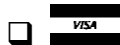
All Classes will be held at the West Music store, 6322 University Avenue, Cedar Falls, IA

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)