



## Rock and Roll Camps Registration Form

Name of Student:

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Age:

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Name of Parent:

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Address:

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Phone Number:

(       )

Cell Phone Number:

(       )

Email:

---

Instrument:

---

Years playing:

---

Instructor:

---

Favorite Songs (list 3):

1

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2

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3

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Favorite Bands:

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### Payment Types

Cash

Card # \_\_\_\_\_

Exp Date \_\_\_\_/\_\_\_\_

Check # \_\_\_\_\_

Signature \_\_\_\_\_

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