



Request for Change

Please submit this form to request changes to your group class or private lesson registration. All change requests are subject to space availability, teacher or program director approval and deadlines as outlined in the CSMA policies and guidelines.

Date: _____ Semester: _____

- Change Class
- Change Instructor or Instrument (Private Lesson)
- Change Length, Time or Day (Private Lesson)

Student Name: _____

Parent Name: _____

Home Phone #: _____ Cell Phone #: _____

Please describe your request on the lines provided. Be sure to indicate your current instructor/class AND requested instructor/class. If you are changing your private lesson please indicate your current AND requested instructor, instrument, lesson length, time and/or day as applicable.

For registration changes resulting in additional tuition and/or fees, please provide your payment information below:

Additional cost \$ _____

Check

Credit Card # _____ Exp. _____ Visa MC

Signature: _____ Date: _____

Teacher Notified **Date:** _____ **Initials:** _____