

# Gabriel Fadale Private Lesson Contract

**Basic and Contact Information:**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Instrument: \_\_\_\_\_

Student's Current School: \_\_\_\_\_ Current grade: \_\_\_\_\_

Parent(s)/Guardian(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Method of Contact (phone call, email, text message): \_\_\_\_\_

**Preferred Lesson Duration:**

30 Minutes (\$20/lesson)

45 Minutes (\$30/lesson)

60 Minutes (\$40/lesson)

**Preferred Lesson Day:**

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

**Preferred Lesson Time:**

Weekday Afternoon (3:00-5:00) \_\_\_\_\_

Weekday Evening (5:00-8:00) \_\_\_\_\_

Saturday Morning (9:00-12:00) \_\_\_\_\_

Saturday Afternoon (1:00-4:00) \_\_\_\_\_

**ASSIGNED LESSON DAY AND TIME:** \_\_\_\_\_

I, \_\_\_\_\_ have been provided with, have read, and agree to the terms of the Private Lesson Studio Policy.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Instructor Signature)

\_\_\_\_\_  
(Date)