



MYC[®] Level One Canadian Registration Form & Materials Receipt

STUDENT'S NAME _____ MYC LEVEL _____

BIRTHDATE _____ DAY/TIME of CLASS _____ / _____

SCHOOL CHILD ATTENDS _____ GRADE IN SCHOOL (if applicable) _____

PARENT'S NAME _____

ADDRESS _____

Street/RR#

City/Town

Province

Postal Code

PHONE (Home) _____ (Work) _____ (Cell) _____

EMAIL _____ INSTRUMENT AT HOME _____

*Student information is for use only by Music for Young Children.
It will not be passed on or sold to a third party without your written consent.*

HOW DID YOU HEAR ABOUT MYC?

brochure word of mouth newspaper ad website Facebook Instagram

other (please specify) _____

IS THERE ANYTHING SPECIAL THAT WE SHOULD KNOW ABOUT YOUR CHILD? _____

Summary: Level _____ Technique Tool Box Music Download

----- Tear here -----

Music for Young Children[®] Student Registration Receipt

MYC Student Materials _____ Name _____

MYC Technique Tool Box* _____ MYC Level _____

MYC Music Download* _____ Day/Time of class _____

Other* _____

Handling Fee _____ * optional supplies

Classroom Supplies & Fees _____

GST _____ **Additional supplies are available at the**

PST ** _____ **MYC Shop www.myc.com/shop**

TOTAL _____

**** PST applies in NS, NB, NL, PEI, QC and ON on all supplies except bound books**

TEACHER'S NAME _____ Phone _____ Email _____

COORDINATOR'S NAME _____ Phone _____ Email _____