

LESSON CONFIRMATION FORM

Date of Lesson	Signature of Private Lesson Inst.	Signature of Student	Signature of Parent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Director authorizing payment _____

Signature of Booster Treasurer confirming payment _____

Please indicate how you would like to be reimbursed (circle one):

Booster Check Student Account

Booster check number _____

Signature of Student confirming payment received _____

Check made out to (filled in by parent): _____

Date of issued check _____