

Federico Pivetta

Private Piano Instruction

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REGISTRATION FORM

45 minutes _____ 60 minutes _____ Time/Day preferred _____

Student's Name _____

Address _____

City _____ State _____ Zip _____

Age _____ Date of Birth ____/____/____

School _____ Grade _____

Parent(s) Name _____

Home Phone () _____

Work Phone () _____

Cell () _____

Email Address _____

I have read the above Studio Policies of Federico Pivetta and been given a copy of them for my records.
I release Federico Pivetta from any and all claims of liability associated with the studio, both on and off
premises during the 2016 – 2017 school year.

Student _____ Date _____

Parent _____ Date _____