



765-457-9096  
 PO Box 26, Kokomo, IN 46903-0026  
<http://www.growingkidswithmusic.com>  
 kindermusikwithrj@mac.com

**PAYMENT**

Class fees may be paid at one time, or may be paid in three installments. If paying all at once, payment is due with registration.

One-time payment

<i>Village</i>	\$175
<i>Our Time</i>	\$165
<i>Imagine That!</i>	\$170
<i>Young Child</i>	\$170

Following is the three-installment plan. The registration fee must be included with your registration form and is non-refundable.

	Reg	01/12	02/16
<i>Village</i>	\$75	\$50	\$50
<i>Our Time</i>	\$65	\$50	\$50
<i>Imagine That!</i>	\$70	\$50	\$50
<i>Young Child</i>	\$70	\$50	\$50

You are our best form of advertising. We will give you \$10 per registered family for your referral.

**WHERE**

All classes meet in the basement of Highland Park Church, 516 West Sycamore, Kokomo, Indiana. The church is two blocks west of Washington Street. Directions: Take Walnut (which is one block north of Sycamore) to Webster, which is one-way going south. Once you turn on Webster, the church parking lot is on your right. Enter the doors to the church and take an immediate right down the stairs.

**WHEN**

Spring 2009 classes begin on Monday, January 12 and meet weekly through Thursday, April 30. There will be no classes the week of Spring Break (April 6).

**SPRING 2009 SCHEDULE**

Village	Tuesday Thursday	9:45–10:25 5:15–5:55	Imagine That!	Monday Tuesday	11:45–12:30 5:35–6:20
Our Time	Monday Monday Monday Tuesday Tuesday Thursday	9:45–10:25 10:40–11:20 6:30–7:10 10:40–11:20 4:45–5:25 6:15–6:55	Young Child 2	Tuesday Monday	6:30–7:30 12:45–1:45
			Young Child 4	Thursday	4:00–5:00

**SPRING 2009 REGISTRATION FORM**

Registration deadline is December 27, 2008  
 Make checks payable to Kindermusik, PO Box 26, Kokomo, IN 46903-0026

Parent Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about us? \_\_\_\_\_  
If friend or ad, please be specific

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Class  Village  Our Time  Imagine That!  Young Child

Day/Time First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Class  Village  Our Time  Imagine That!  Young Child

Day/Time First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_

Are there medical or behavioral concerns of which the Kindermusik teacher should be aware?  
 \_\_\_\_\_

Confirmation of registration will be sent within two weeks after receipt of registration form and payment.