

# ULTIMATE MUSIC

## MASTERCLASS

### REGISTRATION FORM

#### PROGRAM DETAIL

Program : Ultimate Music Master Class with Karl Cromor  
Date : \_\_\_\_\_ Venue : Ultimate Metal Music D. Sri Hartamas

#### PERSONAL DETAIL

Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
Mobile No. : \_\_\_\_\_ House No. : \_\_\_\_\_  
No. to call in case of emergency : \_\_\_\_\_  
Email Add : \_\_\_\_\_  
Age : \_\_\_\_\_ School/Occupation : \_\_\_\_\_

#### LESSON DETAIL

Past Experience : \_\_\_\_\_  
Any music gred?  Y/N Level : \_\_\_\_\_  
You have a band?  Y/N \_\_\_\_\_  
Recording experience?  Y/N \_\_\_\_\_  
Stage experience?  Y/N Instrument Owned : \_\_\_\_\_  
Do you teach music?  Y/N \_\_\_\_\_  
Any album?  Y/N \_\_\_\_\_  
Any audio or music industry related experience?  Y/N \_\_\_\_\_

#### AGREEMENT

- 1 The above personal information is correct.
- 2 All fees must be paid in full in first weeks before the commencement of month.
- 3 All fees and terms & conditions are subject to change without prior notice.
- 4 I understand that my participation may be dependent on scheduling or teacher availability and therefore, I may be placed on a waiting list.
- 5 I am agree to fully participate, and commit to what my teacher's teaching.
- 6 Ultimate Music reserves the right at any time to determine the withdrawal of a student from the School for any reason at the discretion of the School. Reasons may include serious disciplinary/behavioural problems.
- 7 Ultimate Music reserves the right to revoke the acceptance and terminate enrolment of the student should any information provided in this application form be withheld or incorrect.

#### PAYMENT

Payment Method : \_\_\_\_\_  
Receipt No. : \_\_\_\_\_

Student Signature : .....  
Date : \_\_\_\_\_

Office Use
Consult by : _____
Branch : _____