

Business of Music Program Student Registration

School:

Name:

Address:

Phone:

Cell:

E-mail:

Parental Consent:

(If under 18 years of age)

Signature:

Emergency Contact:

(Circle One)

Genre: Hip-Hop, Spoken Word, R/B, Neo-Soul, Comedy, Jazz
Latin/ Soul, Reggae, World, Gospel

Technological: Pro-Tools (Audio), Avid Media (Video), Videography (Film)

P.O. BOX 436929
CHICAGO, IL 60643
PHONE (773) 233-7194
TOLL (877) 9RU-PURE
FAX. (773).239-3747.