



## **LESSON REQUEST FORM** (filled out by parent, not the company)

This form is used only when SOH pays the instructor directly from your funding. An **ORIGINAL INVOICE** must be submitted by the Company or Instructor after the Purchase Order number has been issued.

A. Family Number: \_\_\_\_\_

B. Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Type of Lessons: \_\_\_\_\_  
Type of Membership/Pass: \_\_\_\_\_

D. Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
\_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
Phone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_  
GST Number: \_\_\_\_\_

E. Lesson Dates: From: \_\_\_\_\_ to \_\_\_\_\_

**TOTAL COST:**  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

*\*Please indicate any GST charged.*

Please remember that the purchase order procedure does take time. Please fill in this form as accurately as possible and submit it to the office in advance of the program's start date to: [donna.reeds@ecacs16.ab.ca](mailto:donna.reeds@ecacs16.ab.ca)  
You will receive a confirmation email once lessons have been approved.

**The cutoff date for Purchase Orders is May 31.**

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date