



INSTRUMENTAL MUSIC ENROLLMENT FORM

NAME OF STUDENT _____

PARENT/GUARDIAN _____

MAILING ADDRESS _____

_____ ZIP CODE _____

HOME PHONE _____ BUSINESS PHONE _____

PRESENT SCHOOL _____ PRESENT GRADE _____

PRESENT HOMEROOM TEACHER _____

SCHOOL WHICH STUDENT WILL ATTEND NEXT YEAR _____

INSTRUMENT PREFERENCE _____

PREVIOUS INSTRUMENTAL EXPERIENCE _____

I am interested in enrolling my child in the INSTRUMENTAL MUSIC PROGRAM for the _____ school term and understand that he/she must have an instrument in good playing condition when school opens.

Parent's Signature _____

Date _____

INSTRUMENTS MAY BE RENTED FROM ANY OF THE MUSIC STORES THROUGHOUT THE COUNTY

FINANCIAL ASSISTANCE WILL BE PROVIDED FOR THOSE WHO QUALIFY.