

Enrolment Form

Parent/ Guardian Information

Father: _____ Mother: _____

Address: _____ Post Code: _____

Home Phone: _____ Work: _____ Mobile: _____

Emergency Contact Name: _____ Phone: _____

Email: _____

Student Information

Surname: _____ First name: _____

Date of Birth: _____ / _____ / _____ Age: _____ Female/Male: _____

School Attending: _____ Grade: _____

Length of Previous Study: _____ Music Level/Grade: _____

Time Preferences: Preference 1. _____ 2. _____

3. _____ 4. _____ 5. _____

I wish my child to be considered for tuition in (please tick appropriate boxes):

Piano 30min /45 min /60 min **Violin** 30min /45 min /60 min **Viola** 30min /45 min /60 min

Privacy Statement:

Any information provided by you will be held in the strictest confidence and under no circumstances will it be passed on to a third party. This information will only be used internally to identify students and provide you with information relevant to your musical needs.

I agree with the Yvonne Music Centre Policies.

Signature Date of Enrolment