

Instrumental Private and Practise Lesson Enrolment Form:

Child's Name: _____

Age: _____ School Year: _____ Date of Birth: ____/____/____

Parent(s) Name(s): _____

Address: _____

Postcode: _____

Contact Number: _____

Email: _____

Emergency Contact Name & Number:

Instrument 1: _____

Please select:

- Private Lesson 30 minutes
- Private Lesson 45 minutes
- Private Lesson 60 minutes

Please select:

- Practice Lesson 30 minutes
- Practice Lesson 60 minutes

Instrument 2: _____

Please select:

- Private Lesson 30 minutes
- Private Lesson 45 minutes
- Private Lesson 60 minutes

Please select:

- Practice Lesson 30 minutes
- Practice Lesson 60 minutes