

Preucil School of Music
LESSONS PLACEMENT FORM

STUDENT INFORMATION

Name: _____ Birth date: _____
 Ethnicity: Asian American Hispanic/Latino Multiple Groups
 Black/African American American Indian
 Caucasian Native Hawaiian/Pacific Islander
 Male Female Age[†]: _____ School*: _____ Grade: _____
[†] 3 and 4-year-olds: see *Pre-Twinkle Partner Lessons* on the reverse side.
 *If Preucil preschooler, see #8 on reverse side.

Home Address: _____
Street City, State Zip Code +4
 Home Phone: (____) _____ Primary Email _____

FAMILY INFORMATION

Mother Father **Name:** _____
 Occupation: _____ Employer: _____ Work Phone: (____) _____
 E-mail: _____ Cell Phone: (____) _____
 Address: _____
(if different from above) Street City, State Zip Code +4
 Mother Father **Name:** _____
 Occupation: _____ Employer: _____ Work Phone: (____) _____
 E-mail: _____ Cell Phone: (____) _____
 Address: _____
(if different from above) Street City, State Zip Code +4

MUSIC LESSONS

Does the student/sibling attend Music Together® or Preschool at Preucil? Yes No
 Does this student or other immediate family members currently take lessons at Preucil? Yes No
 If yes, list name(s) and instrument(s): _____
 If no, how did you hear about the Preucil School? _____
 Instrument Desired: Piano Violin Viola Cello Bass Voice Flute Harp
 When would you like to begin lessons? Fall Spring Summer 20____
 Have you taken lessons before? Yes No
If Yes: Prior teacher/program: _____
 Reason for transfer: _____
 Dates of study: _____ Current Literature: _____

In order to facilitate timely placement, please *write in all* times you are available for lessons:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9AM-3PM							
3PM-5PM ⁺							
5PM-8PM ⁺							

⁺Please see #3 under *Pre-Twinkle Partner Lessons* on the reverse side

Please submit this form with the \$35.00 placement fee. (*non-refundable*)

