TERRIGAL PIANO STUDIO

CHILD ENROLMENT FORM

Student Name:(in full, as you would like it to appear on certificates etc)	
Date of birth:	
Current Year at school	
Mother's name: Contac	ot No:
Father's name: Conta	ct No:
Street address:	
Email address:	
Current level of playing: (Beginner, Preliminary, Grade etc)	
Type of instrument at home: (piano - acoustic/digital, keyboard)	
Goals for learning: (please be as specific as you can)	
Please advise of any medical conditions/learning issues	•
Emergency contact details please (in case I cannot contact you) Contact name and relationship:	
Contact numbers:	
Where did you find out about Terrigal Piano Studio?	
I have read and understand and accept the Terriga	al Piano Studio Policy

Signed: _____