



Private Music Lessons Request Form Secondary School

Date

Student's Name..... Grade

Parent's Name.....

Instrument.....

Contact Email.....

Contact Telephone Number

Length of lesson (Please select)

- 30 minutes 45 minutes

Preferred time of lesson (Please select):

- Recess
 - After School
 - During Class Instructional Time (Examination candidates in Grade 6 to 10 only)
- I have read the Individual Music Lessons Information and agree to the Terms and Conditions
(Please check box to confirm)

Signature.....

Date.....