



## Private Music Lessons Request Form Secondary School

Date .....

Student's Name.....Date of Birth.....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.....