



## Aeolian School of Music

### Student Registration & Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province/Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

**1.- Preferred Curriculum:** Jazz, Classical, Pop, Blues, Folk, Rock, Songwriter, etc.

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**2.- Background:** Please list any previous musical study information, vocal/instrumental, levels attained, etc.

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**3.- Availability:** which days/times of the week would you prefer for lessons?

**Please check:**

Mon: AM/PM

TUES: AM/PM

WED: AM/PM

THURS: AM/PM

FRI: AM/PM

**Time(s):** \_\_\_\_\_

**Please, check your preferred length for sessions:** 30 Minutes 45 Minutes 1 Hour

**4.- Theory Courses:** are you interested in theory courses? If yes, please specify.

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**5.- Teacher/Instructor:** please indicate your choice(s) so we can help direct you to a suitable teacher

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Would you like to be on our email distribution list to keep up-to-date with events? **Yes** **No**