

JESSICA HULL-DAMBAUGH

PRIVATE FLUTE INSTRUCTION & PERFORMANCE

STUDENT REGISTRATION FORM

Please fill out all information *Indicates required information

*Student Name: _____ Date: _____

*Address: _____

*Home Phone: _____

*Cel Phone: _____

*Birthdate: _____

*School: _____

*Grade: _____

*Band Director's Name: _____

*Parents' Names: _____

*Work Phone: _____

*Work Phone: _____

*Parents' Email Address: _____

How many years has your child been playing the flute? _____

How many years has your child been in band? _____

Has your child ever taken private lessons before? _____

If yes, with who? _____

How long? _____

Does he/she play any other instruments? _____

If yes, for how long? _____

Special Honors/Achievements in Music (I.e. All-State, Regionals, Honors, Bands): _____

Parents: Does your child have any medical/mental conditions that might need special consideration? (I.e. asthma, ADHD, dyslexia, epilepsy, or learning disabilities – knowing this ahead of time will help me tailor my teaching style to your child's needs and will not be used as a factor for determining admission to my studio.) Please explain in detail if possible:

