



Administrator: Sharon Casey  
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 HOLT ACT 2615  
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**MUSIC ENROLMENT FORM 2022**

OFFICE USE ONLY

Student Surname:	Music Teacher.: ..... Year of Entry: .....  Info Sent: Welcome Letter Financial Policy
Student Given Names:	
Preferred Name:	
MUSICAL INSTRUMENT PREFERRED: Piano, Guitar, Violin, Other	
Preferred Music Teacher (if known):	

**Family Details**

Invoice to [eg Mr & Mrs Smith]			
Address Suburb/City		Pcode	_____
Family Phone Number	Email:		

**Student Details**

Preferred Name:	<b>School:</b> Majura/Macquarie/Turner/St Josephs	<b>Year</b>
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female (please tick one)	Class Name	
Date of Birth	Class Teacher	
Current Age in years	Other instruments being learned:	
Other siblings in music program? Y/N	Name(s) of siblings in program	

**Contact Details**

Details	Parent/Guardian 1	Parent/Guardian 2
First Name		
Surname		
Relationship		
Address – Street		
Suburb & Post Code		
Home Phone Number /Work Phone		
Mobile		
Email Address		
Other information we should know about your child for their health, safety and welfare?		