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STUDENT INFO SHEET

Please fill out **in pen**, and return with your first lesson, thanks-

For Wayne's World Files Only, this will be scanned into computer & the original will be destroyed.

Today's Date: _____

Student's Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____

Any and all other Emergency Phones #: _____

Allergies: *(country music not included!)* _____

(Parent) Email address: _____

(Student) Email address: _____

School: _____ Year/Grade in school: _____

Birthday: _____

Parent's names: _____

Brother's and sister's names: _____

"Wayne's World" Instructor's name: _____

Lesson start date: _____ Instrument: _____

Have you taken lessons before on this instrument or any other? How long did you study? _____

List your after school/weekend activities and interests. (ie. sports, clubs, karate, other instruments, work, scouts, etc.) _____

Does your student have any special learning needs you would like to share with the teacher? _____

Parent's Signature: _____

By signing this, you confirm that you have read, understand and agree to the updated 2008-2009 "Wayne's World" policies-