



piano  
studio

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## STUDENT REGISTRATION FORM

**DATE** \_\_\_\_\_

**NAME** \_\_\_\_\_

**AGE**

**DOB**

**GRADE** (*rising*)

**SCHOOL**

**PHONE**

**CELL**

**WORK**

**ADDRESS** \_\_\_\_\_

**CITY**

**ZIP CODE**

**Email address** \_\_\_\_\_

**PARENT'S NAMES** \_\_\_\_\_

**YEARS OF PREVIOUS PIANO STUDY, if any** \_\_\_\_\_

**Does your child have any learning differences that I need to be aware of:** \_\_\_\_\_

**If yes, explain** \_\_\_\_\_

**Please list the earliest time of day you can get here for lessons:** \_\_\_\_\_

**Please list the latest time of day you can get here for lessons:** \_\_\_\_\_

**Please list any days of the week that you absolutely CAN NOT come to lessons:** \_\_\_\_\_