

Young Artists-School of Piano

Application Form

Registration Date: _____

Student's Name: _____ Birth Date: _____ Age: _____

Address: _____

Email: _____

Home Phone# _____ Guardian's Name: _____ Relation: _____

Work Phone # _____ Cell# _____

RCM Piano Grade Completed: _____ RCM Rudiments Grade Completed: _____

Non RCM Piano Level Completed: _____ Text Books Used: _____

Notes:
