



SCHOOL
FOR STRINGS

Student No.:

Application Form

Student Name : First _____ Last _____

Date of Birth : ____/____/____ Age : _____ Gender: M / F
yyyy mmm dd

Home Address : _____ Postal Code : _____

Home Phone : ____ - ____ - ____ Fax : ____ - ____ - ____

Parents / Other Information

Relationship	Mother	Father	Emergency Contact Person
Name	First Last	First Last	First Last
Address			
Occupation			
Email (for office correspondence)			
Contact No.	Cell Work	Cell Work	Cell Work
Work Address			

Parent/Guardian Signature : _____

Date : _____



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Other Information :

Present Day School : _____ Grade : _____

Language of Correspondence : _____

Music Background : _____

For Office Use Only

Student's Name	: _____	Payment Detail :-	
Expected/Start Date	: _____	<input type="checkbox"/>	Registration Fee : \$25.00
Date of Registration	: _____	<input type="checkbox"/>	Annual Performance Fee : \$20.00
Instrument	: _____	<input type="checkbox"/>	Last Month Tuition : \$_____
Class	: _____	<input type="checkbox"/>	Monthly Tuition : \$_____
Teacher	: _____	<input type="checkbox"/>	Quarterly Tuition : \$_____
Class Schedule	: _____	<input type="checkbox"/>	Yearly Tuition : \$_____
Handled by	: _____	<input type="checkbox"/>	Materials / Books: \$_____
Date	: _____		Payment Total : \$_____

Remarks : Annual Performance Fee and Last Month Payment are non-refundable and non-transferable.