

Musical Moments

Piano Lessons Application

Student Name: _____

Age: _____

Phone Number: *home:* _____ *cell:* _____

Email: _____

Any Musical Background? Explain. _____

Lesson Length:

☐ 30 mins

☐ 1 hour

Best Day and Time for Lesson: (List All Available)

* choose best day(s) and write optional times in open spaces

Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

Any Questions or Concerns: _____

