

Student Information Form

Years in SBYO (if you are a new student, please enter "New") \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Parents Names \_\_\_\_\_

Home phone ( ) \_\_\_\_\_

Work phone ( ) \_\_\_\_\_ Extension \_\_\_\_\_

Cell phone ( ) \_\_\_\_\_

Student's E-mail \_\_\_\_\_

Parent's E-mail \_\_\_\_\_

**\*E-mail will be our primary form of communication. Please provide an email address that PARENTS are sure to see.**

Instrument \_\_\_\_\_

Years played \_\_\_\_\_ Years of private lessons \_\_\_\_\_

Private teacher's name \_\_\_\_\_

School now attending \_\_\_\_\_ Grade this year \_\_\_\_\_

School music teacher's name \_\_\_\_\_