

# Cadenza Music School

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## Student Enrolment Form

Student's full name: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Parent/Guardian's name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Phone (Mobile): \_\_\_\_\_ Home: \_\_\_\_\_

Instrument: \_\_\_\_\_

Have you had any prior music training? If yes, please describe briefly:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*\* If you are a mature age student, please also provide a photocopy of your driver's license.*

Please sign below if you have read and agree with the policies and expectations of the school.

\_\_\_\_\_  
Student/Guardian Signature

\_\_\_\_\_  
Date

Please notify the school if any of the details above change.