

STRINGS – INSTRUMENTAL MUSIC LESSONS Application Form 2026

Please tick one of these two options:

- New Student Continuing Student

Lesson options:

- Individual Lessons Group Lessons

Student Name: _____

Year Level/Class: _____

Parent/Caregiver Name: _____

Phone: (H) _____ (W) Mobile: _____

Parent/Caregiver Email Address: _____

Please tick the instrument that your child would like to learn:

- Violin
 Viola
 Cello

Do you own your child's chosen instrument already? (Please Circle) Yes / No

What standard is your child on their chosen instrument? (Please Circle)

Beginner

Intermediate

Advanced

Can your child play any other instrument/s? (Please circle) Yes / No

If so, which instrument/s? _____

By signing this form, you and your child are agreeing to the conditions as set out in the music information document, especially with regards to conditions about billing requirements, lesson attendance commitment, and communication of absences to your instrumental teacher.

Student Signature: _____ Date _____

Parent/Caregiver Signature: _____ Date: _____

Please return your completed enrolment form by email to htrotter@plc.qld.edu.au or deliver to the administration office.