

THAMES VALLEY MUSC SCHOOL ORCHESTRA

STUDENT NAME _____ INSTRUMENT _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ HOME PHONE _____

DATE OF BRTH _____

EMAIL _____

PARENTS /LEGAL GUARDIAN :

FATHER _____ MOTHER _____

WORK PHONE _____

CELL PHONE _____

EMAIL _____

SCHOOL ATTENDING _____ GRADE _____

MUSC TEACHER _____

PRIVATE INSTRUTOR _____ YEARS STUDIED _____

ARE YOU A THAMES VALLEY MUSC SCHOOL STUDENT

ANY KNOWN SUNDAY CONFLCTS : _____

EXTRA CURRCULAR ACTIVITIES : _____