***Dulais Rhys Music Services***

**APPLICATION FORM: PIANO\***

**This is a ‘fillable form’ - see 11. below for returning options.**

\*for other ‘music services’ (Theory/Composition/Music Technology/Conducting) please use a different application form.

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*This information will only be used for its intended purpose, will be treated in strict confidence and will not be passed on to a third party.*

**1. APPLICANT (the person who wants lessons):**

1.1 Full Name: Click here to enter text.

1.2 Current Age (**OR** enter ‘18+’ & →3.): Click here to enter text.

1.3 Birthday (optional): Click here to enter a date.

1.4 Left-handed?  Right-handed?  Ambidextrous?

**2. (if applicant is under 18) PARENT INFORMATION:**

2. Names(s): Click here to enter text.

**3. HOME CONTACT INFORMATION:**

3.1 Postal address & zipcode: Click here to enter text.

3.2 Preferred Telephone #: Click here to enter text.

3.3 Preferred Email: Click here to enter text.

3.4 My preferred method of communication is: Click here to enter text.

**4. PIANO EDUCATION INFORMATION:**

4. Will instruction be needed ‘from scratch’? ‘No’→5. ‘Yes’ →6. Click here to enter text.

***Section 5 does not have to be answered in full.***

5.1 Approximately, how long has the applicant been learning the piano? Click here to enter text.

5.2 How many previous piano teachers has the applicant had? Click here to enter text.

5.3 Reason(s) for discontinuing with previous teacher: Click here to enter text.

5.4 What piano book(s) does the applicant have? Click here to enter text.

5.5 Piano examination(s) or similar passed: Click here to enter text.

**6. AT HOME:**

6.1 What kind of piano or keyboard do you have? Make, type etc.: Click here to enter text.

6.2 If keyboard, does it have a pedal? Click here to enter text.

6.3 Are the keys (piano notes) ‘touch sensitive/weighted’? Click here to enter text.

6.4 Do you have a piano bench? Click here to enter text.

6.5 Is it height-adjustable? Click here to enter text.

**7. SUPPLEMENTARY INFORMATION:**

7.1 Does the applicant play any other instrument or sing? Click here to enter text.

7.2 What does the applicant hope to achieve? For example, play for pleasure; prepare for an assessment/audition/concert/examination/recital; other: Click here to enter text.

**8. LESSON OPTIONS:**

8.1 When would you like lessons to start? Week beginning: Click here to enter a date.

8.2 Please rank (1st choice as #1) your preferred lesson **day(s)** and **time(s)**: #1**:** Click here to enter text.

8.3 What length of lesson would you prefer? Click here to enter text.

**9. ANY ADDITIONAL INFORMATION:**

Questions? Special Needs? etc. Click here to enter text.

*Thank you for your patience in filling out this form – the more information I have, the better prepared I’ll be! Dulais Rhys*

**10. SIGNATURE & DATE:**

10.1 Your name: Click here to enter text.

10.2 [e]Signature: Click here to enter text.

10.3 Date: Click here to enter a date.

**11. To return this form**

**EITHER**

1. complete

2. save to your computer

3. attach to an email

4. send to dulaisrhys(at)ymail(dot)com

**OR**

1. complete

2. print

3. fax to 406-200-7359

**OR**

1. print out

2. complete

3. mail (address on request)