SADDLEBACK VALLEY UNIFIED SCHOOL DISTRICT

INSTRUMENTAL MUSIC APPLICATION

Dear Parents,

Please read this page carefully and be sure to complete the questionnaire.
Tear off and return to your student's classroom teacher as soon as possible.

Thank you,
Music Department

5th Grade Students	6th Grade Students
Intermediate Strings	Advanced Strings Beginning Flute, Clarinet, Alto & Tenor Saxophone, Trumpet, Trombone and Baritone

- - - - Detach - - - - - Detach - - - - - - - - Detach - - - - - - - Detach - - - - -

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_____ ____ _____ _____ _____
Name Grade Room # Classroom Teacher School

1. Do you play an instrument? _____ Which one? _____ How long? _____ Have you studied this instrument privately? _____

2. If selected into the program are you willing to rent an instrument?
   Yes _____ No _____

3. Please specify your choice of instrument from the above list:
   _____ _____
   1st Choice 2nd Choice

Student's Name: _____

Address: _____

Phone Number: _____

My Child and I understand that participation in an instrumental music class is a commitment for the entire school year.

_____ _____
Parent Signature Student Signature