



# MUSIC

## Instrument Lessons

I am wanting to learn a new instrument :

INSTRUMENT:

YEAR:

OR

I am wanting to continue my instrument lessons:

INSTRUMENT:

TEACHER:

YEAR:

I

parent/caregiver name

give permission for

student name

Year

Whanau

to learn the above instrument

I am prepared to pay for these lessons and understand that payment must be made the week after accounts are issued. Payments should be made to the instrument tutor.

**I am prepared to pay for a tutor book if requested by the tutor.**

Administration fee of \$25 to be paid to Mahurangi College Student Services office **as soon as your placement with a teacher has been confirmed.**

Signed

parent/caregiver name

Name and Address for billing

Contact Phone Numbers

Parent email:

Student email:

### OFFICE USE ONLY

Date Received:

Placed with:

Date: