

Ravnsong



New Student Survey:

Name _____

Parent/Guardian _____

Mailing address _____

City/State _____ Zip code _____

Birthday _____

Phone number _____

E-mail address _____

Age of student _____

Grade in school: _____

For younger students:

👉 Does your child know the alphabet? _____

👉 Can your child read? _____

Piano or Voice (Please circle)

Why do you want to take music lessons? _____

What is your musical background?

👉 Have you ever studied an instrument/voice before? _____

👉 If yes, please explain (what, where studied, number of years, etc):

👉 What style(s) of music do you like? _____

Any other comments: _____

"Music gives a soul to the universe, wings to the mind, flight to the imagination, and life to everything."

- Plato -