



ST CECILIA
School
of
Music

APPLICATION FOR TUITION

Return this form to: SCSM PO Box 938, Launceston Tas 7250

GENERAL ENQUIRIES ENROLMENT FORM

Student's Full Name: _____

Address: _____

City/Suburb: _____ P/Code: _____

Telephone: (H) _____ (B) _____

Instrument: _____ Date of Birth: _____

Send All Communications to:

Mr.Mrs.Miss.Ms.Dr. _____

Email: _____

Preferred Lesson Day & Time

Please complete this section fully providing as many options as possible.

Monday Tuesday Wednesday

Thursday Friday Saturday

Afternoon Evening

Preferred Starting Time: Earliest: _____ Latest: _____

60 minute lesson weekly

45 minute lesson weekly

30 minute lesson weekly

Fees will be quoted on application and vary between teachers.