

Achievement Auditions Enrollment Forms

Please fill out each sheet according to each student's first choice for day and time. Students still need a second choice, unless absolutely impossible. Please indicate the second choice from: Saturday am, Saturday early pm, Saturday late pm. Please mark students who are siblings with a bracket in the left hand margin.

* **Attach this page to your enrollment forms.**

* Please make additional copies of appropriate page as needed. You do not need to include pages that have no entries.

* If a student must perform during a certain time period please specify.

Teacher's Name: _____

Instrument(s) students are performing: _____

Best Day/Time to Monitor: _____

Fee _____ x \$10 = _____

_____ x \$15 = _____

Total amount paid \$ _____

Teacher's Name: _____

Saturday A.M.

Student Name		2 nd Choice Day/Time	Performance Minutes	Trophy 3, 6, 9, or 12 yr	Assigned Day/Time & Room (Do not fill out)
Last	First				

Teacher's Name: _____

