

**THE MUSIC DEPARTMENT  
ST OLAVE'S GRAMMAR SCHOOL  
APPLICATION FORM FOR INSTRUMENTAL OR SINGING LESSONS**

**TUITION CONTRACT**

*Please complete this contract in capital letters and sign and date at the end  
Please note that by signing you are entering into a contract and will be liable for payment to the teacher unless the required notice is given*

|                              |   |
|------------------------------|---|
| <b>STUDENT'S SURNAME:</b>    | <b>YEAR GROUP</b><br><i>(at September 2018)</i> |
| <b>STUDENT'S FIRST NAME:</b> |   |

I wish to register my above-named daughter/son for tuition as follows:  
*(Please complete the appropriate box below and submit separate contracts if lessons on more than one instrument are required)*

|  |  |    |
|--|--|----|
| <b>INSTRUMENT:</b><br><i>(State instrument required)</i>         | <b>VOICE</b><br><i>(circle if appropriate)</i> |    |
| Is the student a beginner?<br><i>(Please circle your answer)</i> | YES  | NO |

If 'NO', how long has the student been learning? YEARS

What standard has the student achieved?  
*(Please give details of recent examinations)*

|  |     |    |
|--|-----|----|
| Does the student already have the use of an instrument?<br><i>(Please circle your answer<br/>If 'NO' it may be possible to hire an instrument from BYMT)</i> | YES | NO |
|--|-----|----|

Please give details below of any other instruments the student is learning:

| INSTRUMENT | STANDARD ACHIEVED |
|------------|-------------------|
|            |                   |
|            |                   |
|            |                   |

**PARENTS/CARERS LIVING AT THE SAME ADDRESS AS THE STUDENT**

|   |                  |                 |
|---|------------------|-----------------|
| <b>MOTHER / CARER</b>   | <b>TITLE</b>     |                 |
| <b>FIRST NAME</b>   | <b>SURNAME</b>   |                 |
| <b>FATHER / CARER</b>   | <b>TITLE</b>     |                 |
| <b>FIRST NAME</b>   | <b>SURNAME</b>   |                 |
| <b>ADDRESS</b><br><i>(to which all communications should be sent)</i> |                  | <b>POSTCODE</b> |
| <b>TEL (HOME)</b>   | <b>TEL (MOB)</b> |                 |
| <b>EMAIL</b>  |                  |                 |

**DECLARATION BY PARENT/CARER**

I confirm that I have read the information 'Individual Music Lessons at School' dated April 2018 and agree to abide by the Contractual Agreement and other procedures explained therein.  
I confirm that I have read the School's Data Protection policy and privacy notices.  
I understand the rate at September 2018 for 10 half-hour lessons is £190.00 and that this will increase each September.  
I understand that fees are expected to be paid within 14 days of receiving an invoice from the teacher.

**SIGNED (PARENT/CARER):**

**DATE:**