



(786) 426-6894
 contact@felixspengler.us
ADMISSION APPLICATION

PERSONAL DATA

| | | | | | |
|------------------------------------------------|--|------|----------------------------|------|--|
| Student Name | | | | Age | |
| Parent or Gardian 's Name | | | | | |
| Address | | | | | |
| Home Phone | | Cell | | Work | |
| E-mail address | | | | | |
| What musical instrument are you interested in? | | | How did you hear about us? | | |

TRAINING

| | | | |
|--------------------------------------------------|------------------------------------|---------------------------------------|----------------------------------|
| Please, describe any previous experience | | | |
| What is your level of music training? | Beginning <input type="checkbox"/> | Intermediate <input type="checkbox"/> | Advance <input type="checkbox"/> |
| What do you expect to achieve from this program? | | | |

 Student Signature

 Parent or Gardian 's Signature