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Parent/Student Registration Form

Today's Date						
Student's Name		Age G	Grade	Gender: 🖵 Ma	lle 🖵 Female 🖵 Non-binar	
Parent's Name						
Address	Cit	У		State	ZIP	
Home Phone	Work Phone		Cell Phone_			
Email 1		Email 2				
School/Org			Phone			
Preferred method of contact?	Email 2 Home Phone	Galaxy Work Phone	Cell Phone	Text		
Financial Information: A copy of the first page of your current tax return may be requested.						

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Our child is eligible for: \Box free lunch $\ \Box$ reduced lunch $\ \Box$ neither program

Other helpful financial information:

Income Eligibility Parameters: Family of 4 less than \$56,000 Family of 6 less than \$75,000 AK: Family of 4 less than \$69,500 Family of 6 less than \$93,500 HI: Family of 4 less than \$64,000 Family of 6 less than \$86,000

Part A (To be completed by the parent or guardian)

We want to learn what your child is doing outside of school, and what types of musical activities or interests you have observed at home. Please circle the number that you feel most closely represents how often you observe your child in the following activities:

	1 seldom or never	2	3 fragmently	alma a at	1		
	*****************	occasionally	frequently	almost	aiways		
My	child:						
1.	remembers and sings tunes from televis	ions, radio, CD, tapes and so o	n	1	2	3	4
2.	responds to the rhythm of music by mov	ring, clapping, etc.		1	2	3	4
3.	3. is particularly sensitive to sounds of all kinds, noticing small details in music and everyday sounds				2	3	4
4.	notices small details within a musical sel	ection or in environmental sou	inds	1	2	3	4
5.	enjoys performing for family and friends	, and performs with ease.		1	2	3	4
6.	6. enjoys creating or experimenting with tunes, rhythms, or sounds			1	2	3	4
7.	is aware of slight changes in mood, loud	ness or softness, and sounds of	different instruments in music	1	2	3	4
8.	sings, moves or reacts to music with expr	ression		1	2	3	4
9.	shows focused concentration when lister	ing or reacting to music		1	2	3	4
10.	enjoys reworking musical ideas			1	2	3	4

Describe musical activities your child enjoys outside of school, including church choir, music lessons, family activities, etc.

Please offer your own evaluation of your child's musical interests and abilities.

Do you have transportation? \Box Yes \Box No. We will try to find a teacher near your residence, but if we can't, how far are you willing to travel to lessons? Please name any surrounding towns or suburbs we can consider when searching for a teacher.

Where did you hear about the MusicLink program? If you already have a possible teacher in mind for these lessons, provide the name and contact information if possible.

Please indicate any questions you may have regarding the MusicLink program or comments that may be helpful the to the MusicLink teacher.

FORM C

Part B (To be completed by the student. Not necessary for early childhood nominations.)

Student Name			Age	Grade	
School Music Teacher(s):					
Please answer the following question 1. What instrument are you interested		ing?			
2. Do you currently:					
play an instrument?	🖵 yes	🖵 no	Name of instrument(s):		Years played
• own an instrument?	🖵 yes	🖵 no	If yes, describe:		
Lake private lessons? Tea	acher:				
Lake group lessons? Tead	cher:				
Lake lessons at school?		🖵 no	□ teach yourself?		
3. Do you sing in a choir?	no no	🖵 yes	Where?		
4. Do you play in a band/orchestra?	🗖 no	u yes	Where?		
5. List three of your favorite songs, C		3s			
·					
6. What musical activities do you lik	e?				
7. Describe what you like best about	musical th	nings you d	0		
,		0 7			
8. What other interests do you have?					
o. What other interests do you have.					
9. What else would you like us to kn	ow about y				
9. What else would you like us to kin	ow about y	/ou:			

Send completed C & D forms to:

Unless otherwise indicated below, please return completed forms to MusicLink Foundation, 1043 N. McKinley Rd., Arlington VA 22205 Name:

Address:__

For more information please call 703-534-9490.

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Policy Form

The MusicLink program provides lessons at a reduced fee to students who show musical promise. The student is nominated by a school teacher or youth organization leader who notices enthusiasm and interest in music. The program links this student with a music teacher who volunteers to teach at a reduced rate through the MusicLink program. The MusicLink Foundation does NOT reimburse the teacher for this generous donation. The MusicLink Foundation collaborates with professional music teachers who are members of national music teacher organizations or performing groups to provide quality instruction for MusicLink students. Once this link is in place, the MusicLink teacher assumes responsibility for this student's instruction. The student and his or her parents/guardians agree to abide by the individual policies and guidelines set forth by their MusicLink teacher.

Please read over the policy sheet and sign below to show you accept the following requirements as stated. Failure to abide by these requirements may result in the loss of this opportunity.

The family will:

- participate in an introductory interview with the MusicLink teacher to go over specific studio requirements and financial arrangements of lessons.
- provide financial support for lessons as determined by the program.
- provide transportation to lessons when applicable.
- provide a suitable place and time for musical practice.
- support the child's musical activities at home, school, and in the studio.
- assure regular attendance at lessons and give reasonable advance notice if a lesson MUST be missed.

The student will:

- arrive at scheduled lessons on time, with required music books and assignments well prepared.
- maintain consistent practice of music assignments and complete written theory work.
- participate in performances and other studio activities.

The MusicLink teacher will:

- instruct the student in a manner similar to other students in the studio, with the same student requirements and opportunities.
- keep the scholarship status of the student confidential within the studio.
- inform parents of student progress in the program through annual student evaluations.

CONSENT TO PARTICIPATE

As parent/guardian, we give our permission for _________ to participate in the MusicLink program. I recognize that the MusicLink Foundation's function is to assist in linking our child with a music teacher working independently or through a community music school, college or university, or music business. All MusicLink teachers have been screened through a background check. I understand that the MusicLink Foundation assumes no legal responsibility for claims arising from this instruction, and agree to hold harmless MusicLink Foundation from all legal claims arising in connection with such instruction.

Student: _____

Parent: _