

PRIVATE LESSON FORMS

| A DAY | | | | B DAY | | | |
|-----------------|-------------|-------|---------|-----------------|-------------|----------|---------|
| BLOCK | TIME | CLASS | TEACHER | BLOCK | TIME | CLASS/RM | TEACHER |
| 2-3 | 7:40-9:13 | | | 2-3 | 7:40-9:13 | | |
| 4-5 | 9:23-10:53 | | | 4-5 | 9:23-10:53 | | |
| Lunch/Class 6-7 | 11:00-11:40 | | | Lunch/Class 6-7 | 11:00-11:40 | | |
| Lunch/Class 6-7 | 11:45-12:30 | | | Lunch/Class 6-7 | 11:45-12:30 | | |
| Lunch/Class 6-7 | 12:30-1:15 | | | Lunch/Class 6-7 | 12:30-1:15 | | |
| 8-9 | 1:25-2:55 | | | 8-9 | 1:25-2:55 | | |

PRIVATE LESSON INFORMATION **(PLEASE PRINT CLEARLY)**

NAME: _____ CLASS: 9 10 11 12 TEACHER PREFERENCE: _____

ADDRESS: _____

PHONE: _____

PARENTS NAME: _____ COUNSELOR: _____ INSTRUMENT: _____
 (Voice, Guitar, Flute, etc.)

PARENTS E-MAIL _____ STUDENTS E-MAIL _____

Your signature verifies that you have read and agree to the terms contained in the attached Private Lesson Information sheet.

Parent: _____

Date: _____

(Please keep attached information for your files)