NEW STUDENTS WHO HAVE LEARNT AN INSTRUMENT AT THEIR PREVIOUS SCHOOL

Student Name: __________________________ 2015 Year Level: ______

Previous School: __________________________

Instrument: __________________________

No. of Years Learnt (including this year): __________

Do you Own Your Own Instrument: __________

Which Method Book are you learning from:

☐ Standard of Excellence  ☐ Essential Elements  ☐ Accent on Achievement

☐ e.g. 1 (red), 2 (blue), 3 (green)


☐ Other (give details) __________________________

Contact Details:

Parent Name: __________________________

Phone Number: __________________________

Email: __________________________

Welcome to Stretton!

We will contact you with further information about the Instrumental Music Program.