

SPMS CHOIR

Student Information Form

Student Name _____

Do you play piano? YES NO If yes, how long have you played? _____

Are you in Band? YES NO If yes, what instrument do you play? _____

Are you interested in the spring middle school musical? YES MAYBE NO
(open to all middle school music students)

Are you interested in being a member of Show Choir? SINGER/DANCER CREW BAND
(open to 7th & 8th Graders only)

Address _____ City _____ Zip _____

Age _____ Grade _____ Birthday _____ Home Phone _____

Student E-mail _____ [] don't have one

Parent(s)/Guardian(s) Name _____

Parent E-mail _____ [] don't have one

Parent Cell Phone _____ Student Cell Phone _____

Work phone or optional cell phone _____

Student Adult Shirt Size: *(circle one)* S M L XL 2X 3X

Any medical conditions I should be aware of? YES NO

*If yes, please specify _____

Parent(s)/Guardian(s) willing to volunteer for music department events? YES NO

Best time to call? Morning Afternoon Evening

Student's Extra Curricular Activities: _____

Any Other Pertinent Info: _____

***Email Addresses will be kept private and used only for Music Department correspondence. We are** attempting to limit the amount of paper used throughout the year and also utilize the internet/email as an educational tool for assignments, newsletters, etc. Thank you for your cooperation.*