Music Program Application

Please send completed application to Joyce Allen at jallen@rcbaonline.com

APPLICANT INFORMATION

Full Name:	
Address:	
Email:	Phone:
Date of Birth:	Grade Level:
PRIMARY PARENT/GUARDIAN INFORMATION	
Full Name:	
Email:	Phone:
EMERGENCY CONTACT INFORMAT	TION
Full Name:	
Email:	Phone:
MUSICAL BACKGROUND	
Instrument:	
Years of Musical Experience:	
Previous Performance Experience: (list schools, lesson studio performances, or groups)	
Musical Goals: (i.e. reason for wanting to join, future plans for instrumental performance, etc.)	
Are you willing to attend all rehearsals and performances?	
Yes No	
Student Declaration:	Declaration:
By submitting this application, I understand that acceptance means the student is enrolled as an RCBA student and must comply with all campus policies.	I, the undersigned, give permission for my child to participate in the RCBA Homeschool Music Program. I understand that my child is required to adhere to all RCBA campus policies and participate in all scheduled performances.
Student Signature	Parent/Guardian Signature