



FORM ML



Registration Form

All links between students and teachers of the MusicLink program require registration through the MusicLink Foundation. Copies of this form will also be kept in local/state MusicLink records.

1. STUDENT INFORMATION

First Name _____ Last Name _____ Birth Date: _____ Age _____
Gender: M F Grade _____ Ethnic Origin: African American Asian Caucasian Hispanic Native American Other _____
Instrument _____ Other Instrument _____

2. PARENT OR GUARDIAN INFORMATION

First Name _____ Last Name _____
Address _____
City _____ State _____ ZIP _____
Home Phone _____ Work Phone _____ Cell Phone _____
Email 1 _____ Email 2 _____

3. Financial Information

The MusicLink Foundation provides reduced lessons (50% normal fee or less) to students who meet the following criteria of financial need. Please provide information that will confirm this eligibility of your child for the program.

School Lunch: Free lunch Reduced Lunch Other (explain below)

Home schooled family information: family of 4—\$26,000–\$38,000 family of 6—\$38,000–\$51,000 other (explain below)

Additional financial need information: _____

4. LINK INFORMATION

Lesson Type: Private Group Early Childhood

MusicLink Lesson Starting Date: _____

Current Teacher _____ Previous Teacher _____

5. SCHOLARSHIP INFORMATION

This information is required to assist in establishing the overall scholarship contribution of our teachers to the MusicLink program. This information is kept strictly confidential.

Lesson Frequency: Weekly Biweekly Length (minutes) _____ Approximately how many lessons per year? _____

Normal fee charged per lesson \$ _____ MusicLink fee charged per lesson \$ _____

Other Financial Arrangements: _____

6. ADDITIONAL ACTIVITIES

Computer Lab frequency _____ length (minutes) _____

performance classes frequency _____ length (minutes) _____

Recital frequency _____ length (minutes) _____

Other activities _____

Should we send our MusicLink newsletters to your student? Yes No

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TEACHER INFORMATION:

First Name _____ Last Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email 1 _____ Email 2 _____

Address _____

City _____ State _____ ZIP _____

Teaching Experience: _____ years. You began teaching in what year? _____

Instruments taught: _____

Memberships: MTNA NFMC MENC ASTA NATS IAGE ASOL NGCSA Other _____

Certifications _____

Background _____

Education: Associates Bachelors Masters Doctorate Diploma

SCHOOL/ORGANIZATION INFORMATION:

If the student was nominated by a school or organization, please complete the following information.

School/Org. _____ Phone _____ Fax _____

Address _____

City _____ State _____ ZIP _____

Email 1 _____ Email 2 _____

NOMINATOR INFORMATION:

First Name _____ Last Name _____ Position _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Work _____ Fax _____

Email 1 _____ Email 2 _____

TEACHER AGREEMENT:

The MusicLink Foundation is required to obtain a background check on all of its teachers. Please provide your social security number and date of birth below. **This information will be kept strictly confidential.** Please feel free to contact the national office if you have any questions or concerns.

I understand that the MusicLink Foundation assumes no legal responsibility for claims arising from this instruction, and I agree to hold harmless MusicLink Foundation from all legal claims in connection with such instruction. I authorize the MusicLink Foundation to conduct a background check on my criminal record. Submitting this form in agreement by signing below represents my entering into a contract with MusicLink Foundation if my application is accepted by MusicLink Foundation. I am also declaring that the information provided is true to the best of my knowledge.

MUSICLINK TEACHER

DATE

SOCIAL SECURITY NUMBER

BIRTH DATE

Send completed forms to your local or state MusicLink Coordinator or directly to MusicLink Foundation, 1043 N. McKinley Road, Arlington, VA 22205

PLEASE NOTE: All MusicLink forms can be completed online through the MusicLink website at www.musiclinkfoundation.org