



137 Saint Paul Street
Westfield NJ 07090
(908)232-3310
www.NazzaroMusic.com

Annual Information Update

PLEASE FILL OUT BOTH SIDES OF THIS FORM.
This needs to be completed every year to keep our records up to date.

Your comments and evaluation are very important to us as we begin each year of piano study. We appreciate your insight as you complete this form.

Today's Date: _____

Adult Student Name:
[Please Print]

Spouse Name:

Scheduling — Your Availability For Lessons and Makeups
THIS AREA CAN NOT BE LEFT BLANK.
PLEASE BE FLEXIBLE AND USE DETAILED TIMES.
So we can best schedule lessons for your family,
Keep in mind kids schedules and traveling obligations.
Also indicate any days not available.

Phone Numbers

Home: _____

Work: _____

Cell phone: _____

Spouse Work: _____

Spouse Cell phone: _____

	Mon	Tues	Wed	Thurs
Times Available (3:30-9:15pm)				
Other Commitments & Times (i.e. Kids' schedules, traveling obligations)				

List Emails for Updates and Correspondence
(Usually about once a month)

Home Email: _____

Work Email: _____

Other Email: _____

Teacher, Day, Time , and Lesson Length Preferences
(PLEASE CIRCLE)

Street Address _____

Town _____

Zip code _____

Paul Nazzaro (Mon Tues Wed Thurs) 3:30-9:15 PM

Mark Raimondi (Mon Tues Wed & Thurs) 3:30-9:15 PM

30 minutes 45 Minutes 60 Minutes

Availability: Mon Tues Wed Thurs

Person to Contact In Case of Emergency (after spouse)

Name: _____

Relationship: _____

Phone Number: _____

Earliest Time Available: _____

Latest Time Available: _____

Preferred Day and Time Range: _____

Current Age: [OPTIONAL! but helpful] _____

I have read, understand, and agree to both sides of the Admissions Agreement, have read and agree to the Studio Policies as listed on the Admissions Agreement, and have a copy of the Yearly Lesson Schedule, and have filled out IN FULL the Introductory Questionnaire or Annual Information Update.

ADULT STUDENT'S SIGNATURE: _____

DATE OF SIGNATURE: _____

PRINT ADULT STUDENT'S NAME: _____

ANNUAL INFORMATION UPDATE

SECTION A: Family Musical Background

What instruments are played in the family? By whom?

What music study have your parents had?

What contact with classical music does the family have?
(attending concerts, heard at church, listening to recordings
or radio, etc.)

SECTION B: Previous Musical Experience

Instrument: _____ Years of study: _____
Teacher Name: _____

Instrument: _____ Years of study: _____
Teacher Name: _____

Approximate Level: (Please circle one)

Absolute Beginner Beginner
Intermediate Advanced College Trained

Example Repertoire Pieces:

SECTION C: Are there other points which you feel might be helpful for us to know as we begin lessons?

Visual/Eye Problems (e.g. glasses, contacts, etc.):

General Physical Wellness:

Hearing:

Allergies (please list):

Right-Handed? Left-Handed? (Circle one)

Other:

SECTION D: Piano and/or Keyboard Information

Piano

Brand (e.g. Steinway):

Kind (e.g. spinet, full upright, baby grand)

Year Made (estimate if needed):

Condition:

Last date Tuned (estimate if needed):

Keyboard/Digital Piano

Brand (e.g. Yamaha):

Model (e.g. PSR-530)

Kind (e.g. keyboard, synthesizer, digital piano)

Year Made (estimate if needed):

Condition:

Number of keys (61, 76, 88?):

Do you have a bench to sit on? (Circle one) YES NO

List accessories you have (e.g. bench to sit on, keyboard
stand to put keyboard on, sustain pedal, headphones, etc.):

SECTION E: Other Important Questions

Favorite styles of music? (classics, popular standards (e.g. Gershwin/Rodgers & Hart), rock, jazz, Broadway, New Age, etc.)

What would you like to accomplish next year?