



# 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: \_\_\_\_\_

Student Name(s): \_\_\_\_\_

Parents' Names (First and Last) \_\_\_\_\_

**Phone Numbers**

Home: \_\_\_\_\_

Mother Work:  
Mother Cell phone: \_\_\_\_\_

Father Work:  
Father Cell phone: \_\_\_\_\_

Student Cell phone: (Gr. 8-12 students) \_\_\_\_\_

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

Email (Mother): \_\_\_\_\_

Email (Father): \_\_\_\_\_

Email (Student): \_\_\_\_\_

Street Address \_\_\_\_\_

Town \_\_\_\_\_ Zip code \_\_\_\_\_

Date Of Birth \_\_\_\_\_

Current Age \_\_\_\_\_

Grade for Fall 2020-2021 \_\_\_\_\_

School Attending 2020-2021 \_\_\_\_\_

**Person to Contact In Case of Emergency (after parents)**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

## Scheduling

**Your Availability For Lessons and Makeups**

Keep in mind sibling and work schedules.

**THIS AREA CAN NOT BE LEFT BLANK.**

**PLEASE BE FLEXIBLE AND USE DETAILED TIMES.**

	Mon	Tues	Wed	Thurs
<b>Times Available For Lessons</b> (3:30-9:15pm)				
<b>Other Activities &amp; Times</b> (i.e. Sports, scouts, religious)				

Does the student participate in a **TRAVELING** sport?

Yes No

If so, which sport? \_\_\_\_\_

Name the Months committed to the Sport: \_\_\_\_\_

**REMEMBER WE CAN NOT CHANGE DAY/TIME MID-YEAR WHEN YOU FIND OUT SPORTS SCHEDULES AFTER WE ASSIGN YOUR DAY AND TIME!**

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

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

Preferred Day & Time: \_\_\_\_\_

**ASK YOUR CHILD** to complete this sentence:

*"The reason I am continuing piano lessons is because...."*

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 & the Weekly Practice Schedule, and have filled out IN FULL the Introductory Questionnaire or Annual Information Update.

PARENT or ADULT STUDENT'S SIGNATURE: \_\_\_\_\_

DATE OF SIGNATURE: \_\_\_\_\_

**PRINT** PARENT or ADULT STUDENT'S NAME: \_\_\_\_\_

**PLEASE FILL OUT BOTH PAGES OF THIS FORM**

**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.**

**SECTION A: Family Musical Background**

What instruments are played in the family? By whom?

What music study have the parents had?

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

\_\_\_\_\_

**SECTION B: Student Musical Experience**

Instrument: \_\_\_\_\_ Years of study: \_\_\_\_\_  
Teacher Name: \_\_\_\_\_

Instrument: \_\_\_\_\_ Years of study: \_\_\_\_\_  
Teacher Name: \_\_\_\_\_

\_\_\_\_\_

**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 and Development:

Hearing:

Allergies:

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

Favorite school activities/subjects?

**SECTION D: Please comment on your child's progress in  
school. You might mention:**

(e.g. excellent, good, fair, poor, etc.)

Reading ability:

Physical Coordination:

Concentration Span:

Social Adjustment (Working in a group):

Other:

\_\_\_\_\_

**SECTION E:  
Are there any learning disabilities?**

Yes No

Please list: \_\_\_\_\_

**Are there any physical disabilities?**

Yes No

Please list: \_\_\_\_\_

\_\_\_\_\_

**SECTION F: 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):**

\_\_\_\_\_

**Keyboard/Digital Piano:**

Brand (e.g. Yamaha):

Model Number (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.):