



SAMPLE REGISTRATION FORM FOR HARP PUPILS

Name of pupil:	
Harp parent/guardian name:	
Parent/guardian telephone:	
Parent/guardian email:	
Person to contact in event of an emergency:	
Emergency contact's telephone number:	
Who will usually collect the pupil from lessons?	

HEALTH

Please detail any health needs and/or allergies that your child may have that I should be aware of.

PHYSICAL CONTACT

Physical contact between a teacher and pupil may sometimes be required when demonstrating aspects of posture and technique. If you wish further clarification, I am happy to provide it. Please sign here to confirm that you understand this.

Signature of parent/guardian:

PRINT AND SOCIAL MEDIA PERMISSION

From time to time I may wish to use images of pupils (unidentified) for publicity and promotional purposes.

Do you give permission for images involving your child to be used?

Yes No

LESSON POLICY

Please tick all that apply.

I acknowledge and accept:

The lesson cancellation policy.

That theory and aural training are/are not included in these harp lessons.

The harp teacher's policy on graded examinations.

The harp teacher's policy on music competitions and other harp-related activities.

The harp teacher's policy on maintaining a good practice routine

I understand that the harp teacher will treat this information and all personal data in the strictest confidence.

Signed: