

Application Form for 2014/2015 Academic Year

Please use separate forms for each applicant and fill out all parts of the form

1. **Student Surname**

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2. **Student Forename**

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3. **Parent's/Guardian's Name(s)**

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4. **Address**

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5. **Email address**

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6. **Date of Birth**

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7. **Phone (home)**

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8. **Phone (mobile)**

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9. **Instrument applied for**

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10. **Preferred Centre**

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11. **Especially inconvenient times**

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12. **Previous musical experience**

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13. **Any other relevant information regarding the student's needs**

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14. **Payment Option**

Tick all that apply.

- Direct Debit
- Two Instalments

Completed application forms should be returned to Cork City Music College, Drinan Street, Cork with a NON-REFUNDABLE €50 deposit per application. This will be deducted from the second semester fee.

15. **I have read and agreed to the terms of enrolment**

Tick all that apply.

- (Please tick)

16. **Signature of Parent/Guardian (or Student if over 18 years of age)**

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