

Lesson Link

LessonLink Registration Form

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

1. LessonLink Teacher Information

Name _____ Instrument(s) taught _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ (B) _____ (Fax) _____

Email _____ Years of teaching experience _____

Membership in: MTNA NFMC ASTA NATS IAJE ASOL NGCSA

Other professional affiliations: _____

Educational background: Bachelors Masters Doctorate Diploma

Other background or certification information _____

+1. Student Information

Name _____ Age _____ Sex: M F _____ Grade _____

Instrument _____

Ethnic Origin Caucasian African American Asian Hispanic Native American Other

Address _____

City _____ State _____ Zip _____

Parent/Guardian _____ Phone (H) _____

Financial Information (May be provided through parent Form C) Eligible for Free school lunch Reduced school lunch Other _____

Home schooled income: Family of 4 \$22,000-32,600 Family of 6 \$30,800 - \$43,800 Other _____

Link Information

Type of Link: Studio/Individual (no local or state program) Local/Community link with **OMTA**

Date Link Began _____

Type of Lesson: Private Group Early Childhood

Scholarship Level:

A. Reduced lesson fee - student pays for music and materials

B. Scholarship lessons (nominal payment) - student pays for music and materials

C. Scholarship lessons (nominal payment) - local MusicLink program pays for music and materials

Length of lesson _____

Scholarship: This information assists in establishing the overall scholarship contribution of our teachers to the MusicLink program. This information is kept confidential.

Normal fee charged for this length lesson _____

Fee charged to LessonLink student for this lesson _____

Additional scholarship/financial information _____

Additional activities for this student:

___ Computer lab - how often and length? _____

___ Classes - how often and length? _____

___ Recitals - how many per year? _____

___ Please: ___Send ___Do not send copies of the Link Newsletter to my LessonLink students.

___ Other: _____

Teacher Agreement

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.

LessonLink Teacher Signature _____ Date _____

Send the completed LL Form to your local MusicLink Coordinator:

Mary Hulme

4120 SW Altadena Ave.

Portland, OR 97239-1332