



# NORTH WEST MUSIKON

A REGISTERED DEPARTMENT OF EDUCATION INSTITUTION  
 PO Box 14166, Flamwood Walk, 2535 • Tel/Fax : 018-464-1276 • www.nwmusikon.co.za • info@nwmusikon.co.za

## Application Form

Date

A copy of the parent's ID's and proof of residence, along with the student's birth certificate should accompany this application form

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Surname			Name			Age	
Home Language			School			Grade	
ID No	M/F	W/B/C/A	Telephone (Home)		Cell (Student)		
Home Address			Postal Address				
Instruments available at Home			Current Music Qualifications Practical: _____ Theory: _____				

\*\*\*\*\* INTENDED SUBJECT FOR STUDY \*\*\*\*\*

TRUMPET	CORNET	TROMBONE	EUPHONIUM	FRENCH HORN	TUBA
VIOLIN	VIOLA	CELLO	DOUBLE BASS	FLUTE	CLARINET
SAXOPHONE	RECORDER	CLASSICAL GUITAR	ELECTRIC GUITAR	BASS GUITAR	PIANO
KEYOARD	VOICE	MARIMBA	ADULT MARIMBA	DRUMKIT	ART

DETAILS OF FATHER / ADULT STUDENT	DETAILS OF MOTHER (NOT FOR ADULT STUDENTS)
Surname	Surname
Initials	Initials
ID No	ID No
Cell No	Cell No
Tel (Work)	Tel (Work)
Occupation	Occupation
Employer	Employer
Personnel No	Personnel No
E-mail Address	E-mail Address

WHO is responsible for the account? \_\_\_\_\_

WHO is responsible for the Student's attendance? \_\_\_\_\_

**I hereby give permission to be invoiced via email**     Yes     No

**Signature Mother** \_\_\_\_\_                      **Signature Father** \_\_\_\_\_

I am aware that successful study of music and the music instrument will depend on the positive interaction with the supplementary activities of the Musikon. I undertake to ensure that the fees of the Musikon are paid in time and that the student abides by the rules of the Musikon  
**I am aware that I will be liable for fees until a cessation of studies (cancellation) form has been completed and submitted to the Musikon.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date