

# Enrichment Program

choose one

Guitar Ukulele Drumming

School \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_

Current Grade K 1 2 3 4 5

Parent Guardian Name(s) \_\_\_\_\_

\_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

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