

Greater Hartford Chapter ♦ American Guild of Organists

JOLIDON FUND ♦ Application for Funding for PRIVATE ORGAN STUDY

The purpose of this program is to give persons interested in learning to play the organ the opportunity to undertake formal study of the instrument.

Date of Application _____, 20__

Six-month study period begins: ____ / ____ / ____, and ends: ____ / ____ / ____

STUDENT CONTACT INFO:

Name _____ Age _____

Address _____

Home phone _____ Cell _____ E-mail _____

PARENT/GUARDIAN CONTACT INFO (if Student is under 18):

Name _____

Address _____

Home phone _____ Cell _____ E-mail _____

AGO MEMBER REFERRAL CONTACT INFO:

Name _____

Home phone _____ Cell _____ E-mail _____

INSTRUCTOR CONTACT INFO (if known):

Name _____

Address _____

Home phone _____ Cell _____ E-mail _____

FEE PER LESSON \$ _____ DURATION & FREQUENCY OF LESSONS _____

LOCATION OF LESSONS:

Venue _____ Address _____

Contact Information Name _____ Phone _____
Email _____

LOCATION OF PRACTICE INSTRUMENT:

Venue _____ Address _____

Contact Information Name _____ Phone _____
Email _____

Briefly describe your reasons for applying, including your goals:

Briefly describe any prior musical experience, including study, performance, etc.

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- *Awards will be made in the amount of \$600 to be applied to lesson fees for the specified 6-month period, and will be paid directly to the instructor. Any additional expenses (music, shoes, etc.) are the responsibility of the Student or Parent/Guardian.*
 - *Student, Parent/Guardian, and Instructor agree to hold harmless the American Guild of Organists from any and all liabilities associated with this instruction during the period.*

Your signatures below acknowledge that you agree to the terms contained in this form:

(Student) Date _____, 20____

(Parent/Guardian if student is under 18) Date _____, 20____

(Instructor) Date _____, 20____

Return completed form (PDF) by email
to: ben@gryk.com

or by US mail to:
Benjamin Gryk
138 Lincoln St.
New Britain, CT 06052

<i>For committee use:</i>	<i>Notes:</i>
Date received _____	
Date reviewed _____	
___ Approved ___ Denied	
Check for \$ _____	Date _____ Initial _____