



רון שולמית

הקונסרבטוריון למוסיקה ומחול

Registration Form for year _____ for the _____ family

Address:

City	Street	House #		Zip Code
Telephone	Cellphone	Fax	Email	

Father's info

ID#	Name	Occupation
Cellphone	Email	

Mother's info

ID#	First name	Last name
Cellphone	Email	Occupation

Student info

ID#	Last name	First name	Gender
DOB	Cellphone	Email	
School			Grade

Studies

Instrument	Teacher	Year of study	Class length
2 nd instrument	Teacher	Year of study	Class length
Music track in school? Y/N	Grade Test? Y / N	Which level? A / B / C	Bagrut recital? Y / N
Sibling at RS? Y/ N	Sibling name:		

RON SHULAMIT CONSERVATORY

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