

THE CARTER SCHOOL OF MUSIC

2100 N. Monroe Street • Harold A. Carter Way
Baltimore, Maryland 21217

Telephone: (410) 523-5306 Ext. 17 Fax: (410) 523-9812

Email: schoolofmusic@newshilohbaptist.org

MRS. ALETHIA B. STARKE
Executive Director

MR. ALAN V. POULSON
Secretary

SUMMER APPLICATION FOR ADMISSION

STUDENT INFORMATION

NAME: _____
FIRST M.I. LAST

PERMANENT ADDRESS: _____

TELEPHONE: CELL _____ HOME _____

EMAIL ADDRESS: _____

MALE FEMALE AGE _____ 19-25 yrs 26-30 yrs Above 30 yrs

NORMALLY RESIDES WITH: MOTHER FATHER RELATIVE/FRIEND OTHER

BILLING ADDRESS: (if different from above) _____

DISCIPLINE OF STUDY

INSTRUMENT (check all that apply):

FLUTE PERCUSSION CLARINET

SAXOPHONE VIOLIN TROMBONE

TRUMPET FRENCH HORN CELLO

VOICE PIANO

COLLEGE FOR THE YOUNG (SELECTED STUDENTS):

THEORY I THEORY II

DR. HAROLD A. CARTER, JR., PASTOR
"A Church Determined to Live With Christ"

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CLASSES

Each student will be assigned a private instruction teacher for one (1) 30-minute lesson per week.

Punctuality is a must!

FEES (payable via cash, check, money order, online*)

- **TUITION (per discipline)**.....\$137.50
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Payment is due at the time of registration.

**Payments can be paid online via www.newshilohbaptist.org [Click giving tab; on the Designation line enter: SOM Tuition (student's name)]*

APPLICANT'S AGREEMENT

If admitted to The Carter School of Music, I hereby agree to abide by all regulations and requirements of the school now in effect, or those that may be adopted during my tenure as a student. I understand that failure to follow these regulations may result in my dismissal from The Carter School of Music.

APPLICANT SIGNATURE: _____ DATE: _____

IF UNDER 18, PARENT SIGNATURE: _____

PLEASE SELECT: NEW STUDENT RETURNING STUDENT

PLEASE RETURN COMPLETED APPLICATION VIA EMAIL OR MAIL:

THE CARTER SCHOOL OF MUSIC
2100 N. MONROE STREET, BALTIMORE, MD 21217
OR
SCHOOLOFMUSIC@NEWSHILOHBAPTIST.ORG