

AJO PARENT SURVEY
2008 – 2009 SEASON

THE AYS Program uses the following information to keep a contact and resource database list so that we can get in touch with you as quickly as possible with important information, reminders and pleas for help on occasion (please include E-Mail addresses!).

PLEASE PRINT CLEARLY!

AYS Program Student Name: _____ Upcoming grade: _____

School: _____ Instrument: _____ Student's E-Mail: _____

Home address: _____
Street address City Zip

Home Phone: _____ Student's Cell phone: _____

Parent 1 Name: _____ E-Mail: _____

Home address: (if different) _____
Street address City Zip

Home Phone: (if different): _____ Cell phone: _____

Company: _____ Job Title: _____ Wk phone: _____

Parent 2 Name: _____ E-Mail: _____

Home address: (if different) _____
Street address City Zip

Home Phone: (if different): _____ Cell phone: _____

Company: _____ Job Title: _____ Wk phone: _____

Please describe any special skills or expertise you have that might help the AYS Program:

Do you have any interest in volunteering for any of the following:

- Consistent (weekly/monthly) office help (during the weekday)
- Telephone tree Mailings Orchestra support (attendance, chair set-up, etc.)
- Fundraising Playathon Grant writing assistance
- Corporate Sponsorships Graphic Design Anywhere you need help
- CD Sales Special Event Support

OPTIONAL: the following information about the student will be used for statistical purposes only (for grant proposals) and will not affect your selection for any AYS Program orchestra.

A. STUDENT'S GENDER Female Male

B. STUDENT'S ETHNIC DESCRIPTION

- White/Caucasian Black/African American Hispanic
- Native American Asian/Oriental/Pacific Islander Other

C. Does the student take weekly private lessons?

- YES With whom? _____ (we invite the teachers to our concerts)
- NO