

**ECASD Middle Level
Registration Form
6th Grade**

Last Name First M.I.

Parent/Guardian Main Phone

Address

City

Date of Birth: Month Day Year School Currently Attending

MUSIC ELECTIVE

Please circle **ONE** music choice.

6920 Exploring Music

6930 Orchestra

6910 Chorus

_____ please check here if you have prior string
experience

6900 Band

If enrollments are low, we cannot guarantee that all courses will run.

Parent's Signature

Student's Signature

Date: _____