Participation Information for Music Lessons

A Form for Programs and Agencies

Child’s Name: ___________________________   Age: _____

Our goal is to provide a positive experience for your child by understanding how we can best help him or her to participate successfully in music lessons. Thank you for taking the time to complete the questions below. We welcome your comments and feedback about our program.

What are your child’s goals for this music program? Please choose from the list provided and/or add comments below.

☐ learn to enjoy and appreciate music
☐ learn to be comfortable with an instrument
☐ learn to be comfortable with performing in front of others
☐ learn to read notes/music
☐ build confidence

Additional comments:
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

On a scale from 1 to 10, I would rate my child’s comfort level with music lessons as:

1  2  3  4  5  6  7  8  9  10
Not at all comfortable Somewhat Comfortable Extremely Comfortable

Here is a list of common issues that children may experience when participating in music lessons. Please check any of the issues that you would like to discuss in advance of the first lesson, so that we are able to work with you to develop a plan:

☐ managing the noise in the music room
☐ leaving parent/caregiver and joining music teacher in the class (separation anxiety, difficulty with transitions)
☐ listening to instructions
☐ following instructions
Participation Information for Music Lessons

A Form for Programs and Agencies

☐ being easily frustrated when learning to play a new instrument
☐ coordinating eyes and hands when learning to play a new instrument
☐ establishing a regular practice routine
☐ other: _______________________________________________________________________________________

What are the best ways for us to help your child to have a fun and successful experience in music lessons?
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Please list any medical issues or concerns you may have related to your child's participation in music lessons.
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

I would like to meet with my child's instructor prior to the first music lesson:
☐ Yes
☐ No

Best way to contact me: (please provide name, phone number and/or email address):
________________________________________________________________________________________________________
________________________________________________________________________________________________________

If you are concerned about the physical accessibility of a facility and would like to gather more information prior to enrolling or attending an activity, please refer to Participation 101: Accessibility, available on CanChild’s Participation Knowledge Hub.

A Resource from CanChild’s Participation Knowledge Hub

© Mary Law, Dana Anaby, Gary Bedell, Wendy Coster, Mary Khetani, Laura Turner & Rachel Teplicky, 2013