



Monticello Montessori Public Charter School

Band Permission Form

Students Name _____

Students Grade _____

Parents Name _____

Current email for parents _____

Parents phone number _____

As parent/guardian of (student name) _____

I give permission for my student to participate in Monticello Montessori's Band Program.

Parent signature _____

Date _____



Monticello Montessori Public Charter School
Guitar Class Permission Form

Students Name _____

Students Grade _____

Parent Name _____

Parent email _____

Parent phone number _____

As parent/guardian of (student name) _____ I give permission for
my student to participate in guitar lessons at Monticello Montessori Public Charter School.

Parent signature _____

Date _____