

SEND TWO COPIES

CODE _____

AIM PERFORMANCE EXAM LEVELS III-XII ENROLLMENT FORM

Teacher's Name _____ Telephone _____

Address _____ Email _____

Preferred Work Time (please check one): AM _____ PM _____ Either _____

Extra help appreciated. Please tell co-chair if you are available!

9-1		1-6pm	Open	Please print clearly. Student Name	For publicity, please list Hometown (Please SKIP if hometown listed on the recent Theory Exam form!)	AIM Level
AM	PM	Any Time				
				1		
				2		
				3		
				4		
				5		
				6		
				7		
				8		
				9		
				10		
				11		
				12		
				13		
				14		
				15		
				16		
				17		
				18		

- Names of ALL students in Levels III-XII should appear on this sheet. No students in Levels I ABC or II should be listed. List all students in order of level, beginning with the highest level. Siblings should be marked with asterisks (*) in the left margin.
- Please indicate () necessary time requests for students. *Requests are not to be for reason of convenience!*
Note that "A.M." means 9 a.m. to 1 p.m. and "P.M." means 1 p.m. to 6 p.m.
 No indication means anytime!
ABSOLUTELY NO CHANGES can be made once the scheduling is completed.
- Send one (1) *AIM Performance Exam Levels III-XII Repertoire Form* for each student and two (2) completed copies of *this* enrollment form to the NWSMTA AIM Performance Co-Chairperson who is listed in the NWSMTA Yearbook or on www.nwsmta.org by event's deadline.

Revised 2009

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AM	PM	Any Time				
				19		
				20		
				21		
				22		
				23		
				24		
				25		
				26		
				27		
				28		
				29		
				30		
				31		
				32		
				33		
				34		
				35		
				36		

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