Application Form for a Scholarship for Organ Lessons

NAME	
First	Last
Address	
	State Zip Code
Phone Number	
Email Address	
Date of Birth	Current Year in School
Name of School	or Home Schooled
Are you a member of the N	ashville Chapter of AGO?
Have you received a Nashv	ille Chapter AGO scholarship before? If so, when?
Are you taking music lesson	s? What instrument?
How many years have you	ı taken lessons?
Teacher's Name	(Your teacher will be contacted.)
Teacher's Phone	Teacher's Email
Why do you enjoy playing th	ie organ?
PARENT'S NAME(S)	
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	(Or same as above
	(Or same as above)
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Reference Form for an Organ Lesson Scholarship.
American Guild of Organists. Be sure to have your teacher fill out and return the Teacher
of the American Guild of Organists. Your teacher must be a member of the Nashville Chapter
available if taking lessons for credit through a college) and a member of the Nashville Chapter
To receive a scholarship for organ lessons you must be elementary through college age (not

Applicant's Signature		
Parent's Signature (if 17 or under)		

After filling this out either mail it to: Young Organist AGO, %Lois Fyfe Music, 2209 Crestmoor Rd, Ste 220, Nashville, TN 37215 or sign, scan and email to: yo.coordinator@nashvilleago.org. For any questions, please email them to yo.coordinator@nashvilleago.org.