

Questionnaire for Voice Lessons

☐ If you don't know the answer to a question then put "Don't know"

1. 1. Name _____ Home Phone: _____

E-Mail: _____ Cell Phone: _____

Address: _____

City, State, ZIP _____

2. Age and if applicable, Grade in School: _____

3. Hobbies:

4. Voice Type (Bass, Tenor, Alto, Soprano) _____

5. Singing Goals: (examples: To perform in church, school events, community events; to make top scores in competition such as UIL, All-State or NATS; to go to College for Vocal Performance/music appreciation/music education; to just learn how to sing or get a better general idea of music.... Please use your own words):

6. What kind of music do you listen to?

7. What kind of music do you like to sing?

8. Do you know how to sight-read or read music to any extent? Explain..

9. What would you like for me to specifically help you with while in voice lessons?

10. What kind of experience have you had in singing and performing? (Use the back of this paper if you need to)
