

# Eastern School of Fretted Instrument Repair

3352-B Route 9 South, Freehold, NJ 07728  
(732) 866-9024 email: info@repairguitarschool.com  
www.repairguitarschool.com

## APPLICATION FOR ENROLLMENT

Application Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

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**IF UNDER 18 YEARS OF AGE, THE FOLLOWING SECTION MUST BE COMPLETED  
BY PARENT AND/OR GUARDIAN.**

Name of Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Parent/Guardian: \_\_\_\_\_

E-mail: \_\_\_\_\_

I give permission for \_\_\_\_\_, my \_\_\_\_\_,  
to enroll in the program at the Eastern School of Fretted Instrument Repair.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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**Education:**

School: \_\_\_\_\_ Dates: \_\_\_\_\_ Completed? \_\_\_\_\_

School: \_\_\_\_\_ Dates: \_\_\_\_\_ Completed? \_\_\_\_\_

School: \_\_\_\_\_ Dates: \_\_\_\_\_ Completed? \_\_\_\_\_

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Why do you want to enroll at the Eastern School of Fretted Instrument Repair?:

Do you have any experience with repairing any instruments?

Do you own any tools? If so, which ones?

List any experiences, skills, and/or certifications that may benefit you in your repair studies:

Would you need housing during the program? If so, private apartment or a rented room? Furnished or unfurnished?

Would you have transportation during the program or would you be using public transportation?

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## Emergency Information

Person to be notified in case of an emergency

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_