

M Manhattan School of Music

130 CLAREMONT AVENUE, NEW YORK, NY 10027 | MSMNYC.EDU

COLLEGE PARENT INFORMATION FORM

We are delighted to welcome you to the Manhattan School of Music family. To help us get to know you better, and to more fully engage you in the life of the School, kindly complete the information in this form and return it to the Advancement Office. Please contact us with any questions at 917-493-4434 or at advancement@msmnyc.edu.

Kindly fill out this form, save it to your computer, and email it back to advancement@msmnyc.edu.

Student Information

My Student's Name _____

Parent/Guardian Information

Parent/Guardian 1:

I am a: Parent Guardian Title (Mr., Ms., Mrs., Mx., Dr., etc...): _____

First Name: _____ Last Name: _____

Marital Status: (Married, Single, Divorced, etc.) _____

Preferred Phone: _____ Preferred Email: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Business Title: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Business Phone: _____ Business Email: _____

Parent/Guardian 2:

I am a: Parent Guardian Title (Mr., Ms., Mrs., Mx., Dr., etc...): _____

First Name: _____ Last Name: _____

Marital Status: (Married, Single, Divorced, etc.) _____

Preferred Phone: _____ Preferred Email: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Business Title: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Business Phone: _____ Business Email: _____

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Advancement Office
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