



# Appointment for a trial lesson

- Trial lesson for beginners  
 Trial lesson for intermediate  
 Trial lesson for advanced level

(Please put a cross where applicable!)

Date \_\_\_\_\_

Preferred day \_\_\_\_\_

First name \_\_\_\_\_

Surname \_\_\_\_\_

Age \_\_\_\_\_

Street / Nr. \_\_\_\_\_

Zip code / Town \_\_\_\_\_

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Remarks \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_