

INTERSHIP FORM

APPLICANTS FORM

Complete the form below to apply to our internship

Term & Conditions : Fill out the form in it's entirety. Not all applicants will be position.	chosen. This is an unpaid						
Full Name :							
Full Address :							
E-Mail : Phone	e :						
Date Of Birth : D D M M Y Y	se : Yes No						
Which of the following are most important	t to you ?						
Hands on studio experience	Studio Culture						
Music business knowledge	What really happens day to day						
Mixing/Mastering	Free Studio time						
Potential Job opportunities	Learning						
Recording	Connections						
Session Efficiency	Other						
How did you hear about us?							
Are you under the age of 18? Yes No IF YES, LEGAL PARENT/GUARDIAN MUST SIGN PAGE 2 Have more questions? Email us at liddiamondstudios@gmail.com							

DIAMOND LOVE

by

TP-Mo



Registration Form

If the applicant is under 18, we are required to get additional information in case of an emergency.

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Our Info

- A: 217 W Savannah St Toccoa Ga
- E: liddiamondstudios@gmail.com

PERSONAL	INFORMA	TION							
Full Name :							-		
Address :					SP	OUSE	INFO	RMA	TION
Date of Birth :	/		/	Date of Birth :		/		/	
Email :				Full Name					
Gender :				Email					
Married Status :	Yes	No	If yes, fill out $-$	 Gender					
Phone:				Phone					
				Email					

Still have questions? Reach out to us at liddiamondstudios@gmail.com

By signing below, I hereby acknowledge that I have completely read and fully understand the guidelines, requirements, terms, and conditions of the Diamond Studios Internship. I also confirm that I have taken every action to reach out to Diamond Studios regarding any questions or concerns I have/had.

Parent/Guardian Signature:

THANK YOU For your investment into Toccoa's music scene!

More Information :

If your child can not have photos taken or posted on social media, please let us know!