

**ENROLMENT FORM**

**Please complete and send with cheque by Monday 25 February**

Name ..... Address.....

.....

'phone ..... mobile..... email .....

**ABOUT YOU** To help us ensure that you get the most from the workshop(s) please tell us:

- about your previous singing experience .....

.....

- your reason(s) for enrolling .....

.....

**Do you have any special requirements**, e.g. help with sight or mobility needs, of which you would like us to be aware? If so, please describe below.

.....

**I wish to enrol for SOLO SINGING WORKSHOP on Saturday 2 March 2019 10am-1pm as a singer / listener (please delete)**

**I enclose a cheque for £.....** (made out to C A Gwynn)

I would like to be contacted about future workshops **Y/N**

Map and directions are available at [www.cagmus.org.uk/workshops/html](http://www.cagmus.org.uk/workshops/html)

**Please enclose a stamped addressed envelope if you would like them posted to you.**

Please give the titles plus composer/artist/show of 1 or 2 pieces that you will be prepared to perform; you should know the piece(s) well.

1.....

2.....

**Consent for singers under the age of 18**

**Name of singer** ..... **Date of birth of singer** .....

**Parent/guardian: I give permission for** ..... **to attend the Solo Workshop on Saturday 2 March 2019**

..... (Signature)

Please return this form **by Monday 25 February 2019** to:

**Voice Workshops, 32 Lodge Cottage, Stapleford Tawney, Essex RM4 1TA**