Festival Weekend – Entry Form

You can also download, print and complete this Entry Form from www.davidclover-festivalofsinging.org.uk
Please complete all relevant sections of this form legibly in BLOCK CAPITALS.

Performer's Details:			
Mr/Ms/Miss/Mrs/Other	: Surname:		
First name(s):			
Address:			
	Postc	code:	
Home telephone number	er: Mobile number:	Mobile number:	
Performer's email addre		Age on 2 February 2018 (if 18 or under):	
I, the undersigned, certify David Clover Festival of S		child's participation in The	
Signed Parent / Guardia		Date:	
Parent /Guardian Mobil	e number: Parent / Guardian Email ad	Parent / Guardian Email address:	
Class no. and name	Song title/s and composer/s	Fee enclosed	
	Song they sund composerys	Tee enclosed	
	Total Entry Fe	e(s) payable f .	
Cheques should be made sort code; 60-40-09, a/c r	payable to <i>David Clover Festival of Singing No.2 a/c,</i> or by bar no: 41256581	nk transfer to: NatWest Bank,	
Cheque number enclosed: Or I have paid £ . by bar		ef:	
Do you require the service	ces of the Official Accompanist? Yes / No (please circle	as appropriate)	
<u>-</u>	ou, or any of your supporters, do NOT give permission for any tion purposes, etc., without further consultation from the fes		
addressed envelope must	, the fee, copies of music for the official accompanist (if require to be sent to: The Entries Secretary, DCFS, 29 Kerwin Drive, Sheurday 25 November 2017. It may be necessary to have your percessary to have your percess	effield S17 3DG in an A4 sized	
☐ By submitting this entr Signature of Applicant:	ry, I confirm that Ihave read, understood and accept all the inf Date:	[·] ormation in the Handbook.	
Please tell us how you fo	ound out about the festival:		