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**.

Surname:
Postcode:
Mobile number:
Age on 1 February 2019 (if 18 or under):
ls on the reverse of this form and have checked that these are correct. y in the processing and acceptance of your entry
ficial Accompanist? Yes / No (please circle as appropriate)
pies of all music with this Entry Form ne official accompanist will not be available for you in the festival.
d addressed envelope.
ee:
David Clover Festival of Singing No.2 a/c, or by bank transfer to: NatWest Bank
Fi

□ Please ONLY tick this box if you, or any of your supporters, do NOT give permission for any photograph of yourself being used for publicity, promotion purposes, etc., without further consultation from the festival.

understand that I can opt out at any time by contacting the Festival Committee.

Signature of Applicant:	Date:
	D19 , the parent or guardian MUST complete the following: on this form is correct, and I agree to my child's participation in The
Signed Parent / Guardian:	Date:
Parent /Guardian Mobile number:	Parent / Guardian Email address:

On completion, this form, the fee, copies of music for the official accompanist (if required) and an A5 sized stamped addressed envelope must be sent to: **The Entries Secretary, DCFS, 29 Kerwin Drive, Sheffield S17 3DG** in an A4 sized envelope **to arrive by Saturday 24 November 2018.** It may be necessary to have your package weighed to avoid underpayment of postage.

Please tell us how you found out about the festival:

Please complete ALL of the following details and ensure you provide full and accurate information as the details you provide will appear in the Programme.

Class no. and name	Title(s) of song/aria (including any recit.)	Work song/aria is taken from (if applicable)	Composer	Fee enclosed
Total Entry Fee(s) payable				