

BOOKING FORM

Church Organist Courses 2009



Please complete a separate booking form for each applicant. Print out form and complete all sections in BLOCK CAPITALS, then send with payment of the 10% deposit to:

RSCM Education Administrator, 19 The Close, Salisbury, SP1 2EB, UK

Personal Details

Title: First Name: Last Name:

Address:

Postcode/Zip: Country:

Telephone: Email:

Age group: 18-30 / 31-45 / 46-60 / Over 60

Are you a member of the RSCM? Member of affiliated choir Individual/Student/Junior Friend (no discount applies)

Name of church:

Please give details of any dietary or other requirements such as mobility considerations or medical conditions:

.....
.....

Have you attended an RSCM course before? Yes / No

How did you find out about the courses? Advert or brochure in CMQ / Website / Other:

Course and Accommodation Choice

Salisbury Course for Organists

Please tick your preferred choice of room, and indicate if you wish to share a room with a specific applicant. Rooms will be allocated on a first-come, first-served basis.

- Single
- Twin (sharing with
- Double (sharing with
- En-suite, subject to availability (supplement £45)
- Non-residential

York Course for Organists

We regret that double, twin and en-suite rooms are not available.

- Single
- Non-residential

Payment

Please send a deposit of 10% of the total fee with this booking.

I enclose a cheque payable to "RSCM" for £.....

Please charge my credit / debit card £.....

Type of card (we are unable to accept American Express/Diners): Visa / Mastercard / Switch / Maestro / Other:

Cardholder's name: Card number: - -

Cardholder's address:

Start date (Switch or Maestro only): / Expiry date: /

Issue number (Switch or Maestro only): Security code (last three digits on signature strip):

Cardholder's signature: Date:

I wish to apply for the course(s) detailed above. I enclose a 10% deposit of the total fee, and I understand that terms and conditions apply.

Signed: Date: