

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:

Date of birth: / / Singing voice: Treble / Soprano / Alto / Tenor / Bass

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

Name of church/choir:

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

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Do you intend to apply for a bursary? Yes / No 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 Choice

Spring Course, Sneaton Castle Centre, Whitby

Summer Course, Kingswood School, Bath

Payment

Please send a deposit of 10% of the total fee with this booking. **The full fee is due 8 weeks before the start of the course.**

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:

Signature of parent or guardian if applicant is under 18 years of age:

Signed: Date: