ENTRY FORM - MUSIC 2019

Return to CDMDF Music Coordinator: Mrs L Young, 34 Holmehead Way, Carlisle CA2 6AJ Closing date is **18th January 2019**

Please enclose a sufficiently stamped self-addressed envelope for your receipt and timetable (1 A4 sheet). When no SAE is enclosed, we will assume receipt and timetable are not required. Please keep a record of the numbers of the classes you have entered; the timetable only lists class numbers, not names. Timetable will be posted online - Facebook and website: www.carlislemusicanddrama.com - as soon as available.

CONTACT DETAILS OF ENTRANT:

Title:	First name or initial:	Surname:						
Name school / organisation (if applicable):								
Address:								
		n/City:						
Tel no:	Mob	ile no:						
Email address:								

I, the undersigned, will adhere to the regulations stated in the Syllabus and on the CDMDF website, and accept as final the decision of the Committee in all questions of disputes arising out of, or not provided for, in the regulations. I confirm that I have read the CDMDF Safeguarding Policy for all children under 18 (or vulnerable adults of any age), that I understand that the Festival is not able to take any responsibility for their safety, and that I will convey this to parents/guardians/carers of any such competitors. I give (or have obtained) the necessary consents for the competitors to take part in the Festival.

Signed

Date

PLEASE NOTE:

The Adjudicator will expect a copy of "Own Choice" pieces at the start of the class.

* If you are entering a choir/band/group, please give us your best estimate of the number of performers. We would expect to be notified if this changes radically.

** For participants under the age of 18, please fill in their age at the start of the Festival

*** If you require the Official Accompanist, you must enclose a copy of the music with this form (except in case of a set piece). Unless you comply with this request, your entry will not be accepted. Music must be labelled with the name of competitor and the class number it is for.

- TURN OVER TO LIST COMPETITORS -

Please be advised that the below information may be published in our Festival Programme and/or shared with Cumbria County Council

CLASS number	NAME OF COMPETITOR (in block capitals please)	NAME OF SCHOOL ATTENDED (if applicable and if different from entrant information) or TOWN/CITY	number in group*	AGE** if 0-18	Official Acc.*** yes/no	ENTRY FEE £
			TOTAL TO PAY cheques to be made payable to CDMDF			

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FEEL FREE TO COPY THIS FORM IF NEEDED