COTTINGHAM METHODIST CHURCH MUSICAL FESTIVAL **ENTRY FORM 2017**

	40
1	977-
2	2017

One Individual, Couple, Trio or Group per form please

40	Performer's Name(s) Age (at 5 Jan 2016) – if under 18			
1977- 2017				
the introduction appropriate				
Email (please print	t)			
Class number		Fee £	Official accompanist YES/NO for each entry	
TOTAL		£		
If you have	entered fo	r classes 307 - 309 please st	ate which Church Choir you sing in.	
			postage. An A4 envelope requires a "large ged up to £2 by the Post Office.	
		ave any objection to the abov Il Photographer for publicity p		
			ers under 18 (or vulnerable adults of any age) performers to take part in the Festival."	
			Date	
`	•	rmer / Teacher / Parent / Gu	•	
Please print the r	name clearl	y		
Email (Please pri	nt clearly)			

Payment may be made by cheque payable to CMCMF or by cash delivered to the address below or by Bank Transfer to account CMCMF, a/c number 08805105, Sort Code 52-21-52 using the Adult Performer/Teacher/Parent/Guardian name above as reference.

This form may be photocopied. Entry forms may also be downloaded from www.cottingham-methodist.org.uk/musical-festival.

Completed forms should be sent to Don Maskell 6 The Spinney Cottingham HU16 5AU