

Application form Culford Suzuki Course 2016

Please enclose a deposit of £50 per head

Please make cheques payable to North Surrey Suzuki Group

Parent's name	Surname
Parent's name	Surname
Email	
Address	
Postcode	
Telephone number	
BSI number or equivalent	

Child's name	Surname
Date of birth	Instrument violin, viola, cello
Latest piece	Current Suzuki book
Name of teacher	
Sight reading level, non-reader, beginner, fluent, (please provide detailed information)	

Do you play the viola?

Child's name	Surname
Date of birth	Instrument violin, viola, cello
Latest piece	Current Suzuki book
Name of teacher	
Sight reading level, non-reader, beginner, fluent, (please provide detailed information)	

Do you play the viola?

Photography waiver

In submitting this form I consent to the above being photographed and or filmed during activities and for these images to be used solely for the purpose of promotional material in connection with future Culford Suzuki String Courses. ☐ Please tick if you do not consent.

Signed
Date