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	2017

COTTINGHAM METHODIST CHURCH MUSICAL FESTIVAL MULTIPLE ENTRY FORM FOR TEACHERS/SCHOOLS

Teacher's Name(print clearly please)

Address.....

.....

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2017	7	Postcode		Pi	none			
Performer's name		Age, if under 18 on 15.01.17	Performer's Phone number	Class Number	Fee £	Official accom- panist YES/NO		
				Total	c/f £			
If you hav	ve any e	entries for classes	306 - 308 ple	ease state in which		ir the compe	etitor sings.	
		An Ā	4 envelope r	sized SAE with s equires a "large s being charged u	tamp"		ce	
		you have any ob the Official Photo		above named comublicity purposes.	petitor(s) bei	ng		
				performers under for the performers				
Signed			Date					
Email								
Payment ma	y be m	ade by cheque p	payable to Cl	MCMF or by cash	delivered to	the addres	s below or by	

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

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.

Performer's name	Age, if under 18 on 15.01.17	Performer's Phone number	Class Number	Fee £	Official accomp- anist YES/NO		
		Total	b/f £				
		,					
Total Fee							

Signed Date