



Summer Courses for Young Musicians



Fantasia Music School Registration Form

STUDENT DETAILS

Name _____
Date of birth _____

CONTACT DETAILS

Home address _____

Telephone _____
Mobile _____
Email address _____

CURRENT SCHOOL

School name _____
School address _____

MUSIC COURSE

Tick your choice of course and accommodation:
Course ① Day Residential
Course ② Day Residential
Course ③ Residential
Course ④ Residential

DIETARY REQUIREMENTS

Vegetarian Gluten free Dairy free

INSTRUMENTS & VOICE

Instrument	Grade	Date passed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tick to indicate student's vocal register:
 Soprano Alto Tenor Bass Boy Treble

HOW DID YOU HEAR ABOUT FANTASIA?

DEPOSIT & CONFIRMATION

I enclose the non-returnable deposit and agree to pay the balance of the course fee by the due date.
Value of deposit (cheque enclosed)
£ _____
(Please make payable to **Fantasia Music School**.)
I understand that once my registration is accepted and confirmed any cancellation will be charged in full unless accompanied by a medical certificate.

NAME Please print in CAPITALS

SIGNATURE

DATE

Send your completed form and deposit cheque to:
Fantasia Music School
5 Aspen Way, Middleton-on-Sea
West Sussex PO22 6PW