

Summer Workshops 2007 Registration Form



Please Complete ALL SECTIONS and return to the address below

SECTION A - Personal Details

First Name						
Last Name						
Age on 01/07/07		years		months	Date of Birth/...../.....
(You must be between ages 10 - 19 on this date)					Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address						
				Post Code		
Phone Number				Emergency Contact No.		
Mobile Number				Email Address		

SECTION B - Workshop Choice

3 Days/3 Disciplines Mon 23 - Wed 25 July £150				<ul style="list-style-type: none">• Please tick the box for which days you would like to attend• You may attend a MasterClass without attending the 3 Days/3 Disciplines• Please only tick one discipline per Masterclass day
	Dance	Drama	Singing	
Masterclass - Thurs 26 July £75	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Masterclass - Fri 27 July £75	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

I ENCLOSE INDIVIDUAL CHEQUES FOR EACH WORKSHOP CHOICE
(made payable to NYMT)

(In the event that workshops places are full, cheques will be returned to the address entered above, therefore it is IMPORTANT that you enclose individual cheques for each workshop you would like to attend)

How did you find out about the NYMT Summer Workshops? _____

SECTION C - Declaration

If you are under 18 years old, a parent/guardian must complete this section.
If you are 18 years or over you should complete it yourself.

Signature		Date/...../.....
Print Name			

