



GBRT Carnival Drums Registration Form

I'd love to become a member of the GBRT Carnival Drums and have completed my details on the form below. Please print, complete and return one Registration Form for each person wishing to join the Carnival Drums.

Member's Details

Name: _____

Contact address: _____

Postcode: _____

Telephone number (incl. STD): _____

Email Address: _____

Date of birth: _____ / _____ / _____

Parent or Guardian's Details (If Under 18)

Name: _____

Address (if different from above): _____

Postcode: _____

Telephone number (incl. STD): _____
(in case of emergencies)

Experience

How much drumming experience, if any? _____ Years

Teacher's name (if applicable): _____

Gift Aid

If you are a UK taxpayer, please tick this box to enable the Trust to claim Gift Aid on the member's subs.

As the Carnival Drums Member (or parent/guardian if under 18), I would like (my child) to become a member of the GBRT Carnival Drums and agree to pay £15 per term before each term starts, for the fortnightly term-time rehearsals.

Signature: _____

Please complete and return this form as soon as possible to the address below. Please remember to send your cheque for the first term in advance of the date you wish to start.

Cheques payable to: GBRT Carnival Drums

Return form and cheque to: GBRT Carnival Drums, 44 Firs Avenue, Uppingham, Rutland, LE15 9RE

By returning this form, I accept that the Great Bowden Recital Trust will treat my information confidentially and that they will also provide me with details regarding their future activities, events and concerts.