



WORKSHOP BOOKING FORM

IF BOOKING SEVERAL WORKSHOPS PLEASE PAY FOR EACH ONE SEPARATELY
THIS IS IN CASE ONE OF THE SELECTED WORKSHOPS IS UNAVAILBALE



Please tick as appropriate

MINIJAM

CREATIVE MULTI-MEDIA

VOICE

Please confirm date(s) for workshop(s) booked:

MINIJAM..... CREATIVE MULTI-MEDIA..... VOICE.....

**ALL 1-day workshops are £5
FREE if you are on Income Support or Working Tax Credit**

NAME:

AGE: **SCHOOL:**

HOME ADDRESS:

.....

CONTACT email

CONTACT phone

ANY MEDICAL CONDITION(S)/SPECIAL NEEDS:

.....

FOR MINIJAM ONLY	
Instrument	_____
Approx. standard	_____

PARENT/CARER SIGNATURE:
(for participants under 18)

(PRINT NAME):

I enclose a cheque for £..... (payable to CITY OF YORK COUNCIL)

OR

I enclose proof of income support/tax credit

Please return booking form to:

BANDSTRAND MILL HOUSE NORTH STREET YORK YO1 6JD

Tel: 01904 554663 Email: bandstrand@bandstrand.org