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| Child’s name: | School: |
| Child’s home address: | Date of Birth: |
| Parent / Carer Email: | Parent / Carer Phone: |
| Emergency contact: | |
| Musical experience: | |
| Fees and Payment:  Please note the cost for membership of Coldfall Youth Voices is £6 per session with bursaries available. Please confirm your understanding of the payment options and delete the option that is not applicable to your child.  Option 1  I’m aware that the cost of membership of Coldfall Youth Voices is £72 per term and that this must be paid in advance of each term  Option 2  My child is in receipt of pupil premium funding and I therefore wish to apply for a 50% reduction in membership fees (please note this must be confirmed in writing by the child’s school). A subsidised membership costs £36 per term and I understand that this must be paid in advance of each term. | |
| I give permission for my child to audition for Coldfall Youth Voices on Tuesday 10th July at 5:30 p.m.  Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

If your child wishes to audition for Coldfall Youth Voices, please complete the following application form and return via email to [kate@coldfallyouthvoices.co.uk](mailto:kate@coldfallyouthvoices.co.uk) by Friday 23rd July. Auditions will take place on Tuesday 10th July at 5:30 p.m. in the lower hall at Coldfall Primary School. We aim to audition every child who wishes to apply and therefore, depending on demand it may be necessary to hold further auditions at a later time or on a different day.