

Scottish Amateur Music Association - Courses 2009

Patron: Sir Peter Maxwell Davies CBE

Enrolment Form

I wish to enrol as a member of the following course (*please delete as appropriate):

***NYBBS: NYBBS Reserves/Training Band: NYWES: NYSOS: NYSOS Training
Traditional Scots Fiddle: Chamber Music Weekend: NRSOS Weekend**

Block Letters Please

Name: _____ * M / F

Address: _____

Post Code: _____

Telephone: _____

Email: _____

Local Council: _____



I wish to be * RESIDENT/NON-RESIDENT at the course.

If under 21, please give your date of birth: _____ Age at course: _____

Instrument: _____ Years played: _____ Grade: _____

School/University: _____ Present teacher: _____

Relevant band/orchestral experience:

Scots Fiddle Course only Do you wish individual lessons? YES/NO	Chamber Music Course only Names of other members if attending as a group: _____ Standard (for placing in quartet): * Advanced: Intermediate: Elementary
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Other instruments played: _____

If you attended a SAMA course in 2008, please specify course and position in band/orchestra:

Names of brothers/sisters also enrolling on SAMA courses in 2009: _____

Please note that parents/carers (or players if over 18) will require to complete a form giving all relevant medical information, special dietary requirements and emergency contact numbers roughly four weeks prior to the course.



I wish to enrol for the above 2009 SAMA course and agree to abide by the course rules.

Signature: _____ **Date:** _____

If under 18 years, signature of Parent/Guardian: _____

Please return this completed enrolment form, along with the appropriate deposit, to:

Mrs Joy Mowatt, Honorary Secretary, SAMA, 35 Gellatly Place, Brechin, Angus, DD9 6BS.

All cheques should be made payable to SCOTTISH AMATEUR MUSIC ASSOCIATION