



**EAST SUSSEX COUNTY MUSIC GROUPS
(INSTRUMENTAL) APPLICATION FORM**

I wish to apply for membership of the County Music Group (Instrumental) indicated below (please tick relevant box) :-

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|--|--|
| EAST SUSSEX BRASS BAND (ESBB) | |
| EAST SUSSEX STRING CHAMBER ORCHESTRA (ESSCO) | |
| EAST SUSSEX WOODWIND SINFONIA (ESWS) | |
| EAST SUSSEX YOUTH ORCHESTRA (ESYO) | |

Please complete the form below in CLEAR BLOCK CAPITALS

Full name of Applicant _____

Address _____

Post code _____ Telephone (day) _____ (Evening) _____

Date of birth _____ Age next birthday _____

Present School/College attended _____

Instrument _____

Examinations taken (with Grade, Mark & date) if applicable _____

Previous/present group music-making experience (please state names of orchestras, bands or choirs of which you are or have been a member: with dates) _____

I give consent for any pictures and videos of my child to be used for presentations, displays, publicity or on the website, for promotional or educational purposes. This permission is valid for three years unless I let ESMS know otherwise.

Yes No *Indicate as appropriate

I understand that if I am easily identifiable (eg. a close facial shot) I will be informed first.

I agree that current course fees will be paid when requested as detailed when invoiced.

Signature of applicant _____ Date _____

For applicants under the age of 18 signatures are required from the following individuals to indicate that they support your application and recommend you for membership of the group specified above.

Parent/Guardian _____ Date _____

Headteacher/Principal _____ Date _____

Head of Music _____ Date _____

Instrumental Teacher _____ Date _____
(If none, state none)

PLEASE RETURN TO: East Sussex Music Service
 Performing Arts Centre
 Mountfield Road
 Lewes
 BN7 2XH