

ENTRY FORM

CHICHESTER FESTIVAL FOR MUSIC, DANCE & SPEECH

ENTRY FORM

Registered Charity No. 1040782

CLOSING DATE FOR POSTAL ENTRIES 10 November 2019. Please complete ALL SECTIONS in block capitals and return this entry form together with your cheque (made payable to CFMDS) to the Hon Secretary, Chichester Festival for Music, Dance and Speech, 6 Poyntz Close, Chichester, West Sussex, PO19 8SY. For queries please contact cfmdssec@gmail.com

Correspondence details (Capitals)

Name.....Parent/Teacher/Entrant (please delete as appropriate)

Address.....Postcode.....

Tel No (home).....Mobile.....Email.....

Only forms with all mandatory fields completed will be processed. Mandatory fields are marked with an Asterisk *. Please ensure that your form is complete before submitting.

IMPORTANT: By signing this entry form I confirm the following:

That I and all persons being entered into the Festival by me have given consent to their personal data being collected and processed by Chichester Festival for Music, Dance & Speech for the purposes of the administration and delivery of the Festival. Our privacy policy can be viewed at www.cfmds.org.uk.

That for all entrants under age 18 (or vulnerable adults of any age), I give (or have obtained) the necessary consents for the entrants to take part in the Festival.

That all entrants listed agree to abide by the Festival Rules as contained in the printed syllabus/website www.cfmds.org.uk

That I give my consent for Chichester Festival for Music, Dance & Speech to email me any information regarding Festival events eg newsletters, forthcoming concerts, volunteer duties etc. If you do not wish to receive this information please unsubscribe by emailing cfmdssec@gmail.com.

Print Name..... Signed..... Date.....

Entrant's Name* (Capitals) <i>as it will appear in the programme</i>	Date of birth*	Local Authority area	Please tick this box if you agree to be photographed by the Official Photographer*	Class No.	Class No.	Class No.	Class No.	Class No.	Total Fees £

