

**FESTIVAL DE MUSIQUE de ST GAUDERIC 2014**

**BOOKING FORM**

NAME.....

ADDRESS.....

.....

.....

POSTCODE..... TELEPHONE.....

Please return to the Festival Administrator

|                     |
|---------------------|
| VOICE:              |
| Soprano             |
| Alto                |
| Tenor               |
| Bass                |
| Non-singing         |
| Tick as appropriate |

Emergency Contact in case of incident during the Festival: .....

Please note any choirs that you sing with regularly, to be included on the festival programme:

.....

**Please accept my booking for the St Gauderic Music Festival 2014:**

I require accommodation for the period from ..... to .....

I confirm that I will share accommodation with.....(name) OR I will pay the single supplement

I confirm that I will arrange travel insurance cover for the period of the Festival.

I enclose my deposit cheque for ..... payable to St Gauderic Music Festival.

I will pay the balance on receipt of an invoice by 1 June 2014.

Signature.....

Date.....

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