

SOLO VERSE SPEAKING ENTRY FORM

Please use Block Letters

Teacher's Name:
Teacher's Contact No.:
Solo Verse Speaking Age:
School:

No.	Name	Date of Birth
1.		
2.		
3.		
4.		
5.		
6.		
7.		
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10.		
11.		
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15.		
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17.		
18.		
19.		
20.		

Please use different Entry Form for EACH Age Group. Photocopying is permitted.

Send your entries to - Registrar, Arklow Music Festival Office, Kearon's, Castlepark, Arklow, Co. Wicklow.

Telephone Enquiries: (085) 8556686 E-Mail: arklowcfs@hotmail.com

Closing date for entries: 21st December, 2018 **Entries accepted up to 16th January, 2019 on payment of double fees**

Please enclose stamped addressed envelope for confirmation of your entry.

**ARKLOW MUSIC FESTIVAL
ENTRY FORM
Please Use Block Letters**

COMPETITION No.	
Competition:	
Competitor's Name:	
Email / Phone No.:	
Date of Birth:	
Teacher's Name:	
<i>(if applicable)</i>	
Name of Choice Pieces:	
<i>(if applicable)</i>	
Copy of Choice Pieces enclosed <input type="checkbox"/> Yes <input type="checkbox"/> No	
Entry Fee €_____ enclosed <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact No.:

Please tick to indicate that permission is given to include entrant's name in the 2019 Festival Programme

*Teachers - if you are entering a number of students for solo verse speaking,
please fill in list of childrens' names and dates of birth on reverse.
Use one form per age group. Photocopy as required.*