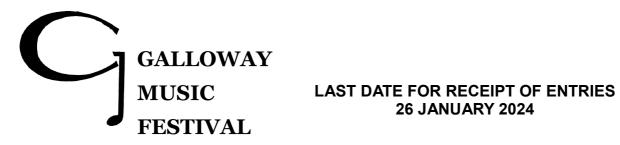


# **OFFICIAL ENTRY FORM**

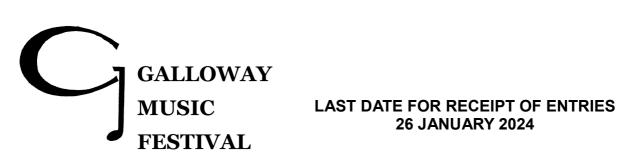
### **ENTRANT INFORMATION**

Class Number			Grade/Level		
Instrument (e.g. Piano/Voice)					
Name of Performer	1				
	2				
	3				
School/Home Town					
Number in Group (if 4 or more)	ı				
	1	For graded classes onl	ly, please specify	: ABRSN	l or TRINITY
MUSIC/SPEECH (Title & Composer)	1				
	2				
	3				
	4				
	5				
Do you need an official accompanist?					
Are you using a recorded accompaniment?					



# **CONTACT INFORMATION**

Name of Entry Contact		
Address		
E-mail		
Phone No.		
Are you happy for your entrant to be photographed?		
Have you seen & do you accept our Safeguarding Policy?		



# FOR YOUR INFORMATION

Festival Date	11-16 March 2024
ENTRIES SECRETARY	BETHAN CHAMBERS Grovehill, Old Edinburgh Road, Minnigaff, Newton Stewart, DG8 6PL E-mail: gallowaymusicfestival@gmail.com Tel.: 07734445650
Music/Speech	1 copy/scan of each piece to be sent to Entries Secretary as above

### **ENTRY FEE**

		Number
Solo & Duet Classes	£5.00 each	
Group Classes (3-12 performers)	£10.00 each	
Group Classes (13 or more performers)	£20.00 each	
School Solo & Duet Classes	£3.00 each	
School Group Classes (3 or more performers)	£5.00 each	
TOTAL COST	(£)	
Payment by:		Please Mark
Cash		
Cheque	Made out to 'Galloway Music Festival'	
Bank Transfer	Account name: Galloway Music Festival Sort code: 83-26-01 Account number: 00150673	