

SOUTH WEST BRASS BAND ASSOCIATION

**MID-WINTER BRASS WORKSHOP APPLICATION FORM**

Please reserve ..... places for the following named.

**FEES: ADULT - £40    YOUNG PERSON 18 OR UNDER £30**

(Please state whether player is an adult or young person)

I/We enclose a cheque for £.....(payable to SWBBA)

(block letters please)                      **Important: State exactly 1<sup>st</sup>,2nd, Eb Bb etc)**

Name.....Instrument.....Adult/YP.....

Name .....Instrument.....Adult/YP.....

Name .....Instrument.....Adult/YP.....

Name .....Instrument.....Adult/YP.....

Name .....Instrument.....Adult/YP.....

Name.....Instrument.....Adult/YP.....

Band .....

Contact Name.....

Address .....

e-mail..... Telephone .....

**This form to be returned, together with cheque by no later than WEDNESDAY  
10<sup>th</sup> JANUARY 2018 to Co-ordinator for this event John Croker**

**42 Abbotsham Road Bideford EX39 3AP. Any queries e-mail  
[jh.croker@gmail.com](mailto:jh.croker@gmail.com) or 01237 475438**

A SOUTH WEST BRASS BAND ASSOCIATION  
EDUCATION AND TRAINING PROMOTION