

# GODALMING YOUTH ORCHESTRA REGISTRATION FORM

**Autumn Term 2010**

Name of GYO member .....

Age ..... D.O.B .....

Name and address of parents for all correspondence .....

.....

..... Postcode .....

Phone number..... Mobile .....

Email .....

Instrument..... Standard .....

Instrumental teacher's name and address .....

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Other instruments.....

Other orchestras .....

School .....

Does your child suffer from any illness or allergy we should be aware of? ...

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Signature of parent ..... Date .....

Please send to Lindsay Brown at:

The Rectory, The Street, Sutton, Pulborough, West Sussex RH20 1PS

For more information visit: **[www.godalmingyouthorchestra.org.uk](http://www.godalmingyouthorchestra.org.uk)**