Cambridge Woodwind Makers

Recorder activity day booking form

Booking for: recorder activity day | Sunday 19 August | 1.00 - 4.45pm | £48 per person

Please complete this form and return it, with a cheque for all the attending participants, made payable to Cambridge Woodwind Makers. Send it to: CWM c/o Wood, Wind & Reed, 106 Russell Street, Cambridge, CB2 1HU.

Full name of eac	h partio	cipant	Dates	of birth	Postal address, including postcode			
		red in case of emergency (must be		Home ni	umber			
number we can o	contact	you on for the duration of the cou	ırse)	nome n				
Email address				I				
		n any medical conditions that may epilepsy, plaster allergies etc.)	y affect	them dur	ing this workshop please include	e details	here	
(uletaly require)	nents,	epilepsy, plaster allergies etc.j						
Please check and	l tick th	e following statements to show y	ou und	erstand ar	ad agree with them before			
signing the decla			ou unu	erstand di	la agree with them before	Yes	No	
		ken at the event and used for publ						
		own viewing and also to illustrate	e the na	ture of the	e workshop for future			
		t include any names.	monti	anad child	(ron) and normit thom to be			
I understand that photographs may be taken of the above mentioned child(ren) and permit them to be used for these purposes.								
Parents are weld	ome to	stay for some or all of the session	n. Please	e tick to in	dicate whether you intend to			
or not.								
I am happy for CWM to share my details with the ACE Foundation (another local arts charity)								
I am happy for CWM to share my details with other organisations they consider suitable and of interest								
to me.								
We will do our utmost to ensure that your child is safe at all times. The following notes are to clarify our								
position. CWM has public liability insurance. We do not accept responsibility for any loss, damage or injury caused by or during attendance except where it can be shown to result directly from the								
negligence of CWM.								
I have noted the details of this workshop and agree to the child(ren) taking part. I understand they will								
be using a variety of hand and power tools. I understand that the adults at the workshop will take all								
reasonable care of the participants. Should an accident occur I consent to the adults in charge making an								
appropriate decision on treatment in the situation. In an emergency I understand that every effort will								
be made to contact me, but I consent to CWM making an informed decision in my absence. I understand								
that the leaders of the workshop reserve the right to send any participants home if deemed necessary. Full name of parent or Relationship								
guardian	ent or			elationship ild(ren)				
Summer								
				na(ren)				

Cambridge Woodwind Makers may contact you by phone, email or post and will NOT share your details without your consent.

Cambridge Woodwind Makers | Sponsored by:



The ACE Foundation



To add your organisation here, please contact Daniel Bangham on 01223 713101 or information@cambridgewoodwindmakers.org

WOOD WIND& REED

Music Shop � Cambridge The Woodwind & Brass Specialists

www.cambridgewoodwindmakers.org | information@cambridgewoodwindmakers.org | +44(0)1223 713101 The Champion Workshop, Bury Farm, Stapleford, Cambridge, CB22 5BP | Registered charity: 1146167

Cambridge Woodwind Makers

If you would like to become a Friend of the Cambridge Woodwind Makers and receive your first Repair & Maintenance Course for free, and all subsequent ones for £45, please fill out the standing order mandate on the following page. Full details of our membership can be found online at: <u>www.cambridgewoodwindmakers.org</u> in the 'support us' pages.

Thank you for supporting Cambridge Woodwind Makers.

Standing Order Mandate						
Account holder	full name					
Account holder address, including postcode						
Sort code			Account number			
Bank or buildir and address, in postcode						
Signature		<u>.</u>		Date		

For office use only								
To the bank:								
Please make the standing order payments as detailed to:			Lloy	Lloyds TSB, Gonville Place, 95 Regent Street, Cambridge, CB2 1BQ				
Sort code		3	0 13 1	13 55 Account num		er	27016960	
Account name Cambridge Woodwind Makers								
Amount	£30	.30 Ar		Amount	Amount in words		ounds	
Payments should start on the 20th2012 and every six months thereafter until cancelled								
Payment reference:								

If you would like to make the initial payment by cheque it must be made payable to Cambridge Woodwind Makers for the full amount of £65 and sent, with the details form, to: CWM c/o Wood, Wind & Reed, 106 Russell Street, Cambridge, CB22 1HU.

Paying by standing order saves you £5.00 annually. The standing order will be set at £30.00 to be taken every six months starting on the 20th of the month following application. You will be sent a new membership card each year.

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