



**BYMT ADULT CHOIR
APPLICATION FORM – 2016/17
Wednesday 7.30 - 9.30pm**

Name: (Mr/Mrs/Miss/Ms)
(PLEASE PRINT CLEARLY)

Address:
.....

..... Post Code:

Telephone No. :

Email:

I understand the fee is £65, payable within the first two weeks of each term.

Signed:

Date:

