Wonderful Winds



Under 18's Booking Form - Bristol, 30th June 2024

CHILD BOOKING DETAILS			
Name			
Address:			
Postcode:			
Approximate Grade. (see website for guidelines):			
Tell us a bit more about their playing experience, any groups they play with, etc.			
Please tick if they will also be bringing/have experience playing any of the following (in additional to their regular			
flute) or if they would like to borrow/try one on the day.			
They're bringing: Piccolo Alto Flute Bass Flute			
They have experience playing: Piccolo Alto Flute Bass Flute			
They'd like to play: Piccolo Alto Flute Bass Flute			
Where did you hear about the workshop? (If teacher, please give their name)			
<u>PAYMENT</u>			
Please tick as appropriate, and quote players name as reference on all payments. BACS payment preferred.			
have paid £20 by bank transfer or I am enclosing a cheque for £20			
Bank transfers to: Fiona Hunt Sort Code: 30-84-75 Account number: 18488260			
Cheques made payable to Fiona Hunt and posted to the address below.			
Please send your completed form (including medical details overleaf) to Fiona Hunt			
by email to: fi.hunt@btinternet.com			
or by post to: Fiona Hunt, 5 Cave Cottages, Badminton Road, Downend, Bristol, BS16 6DB			
All forms and payments must be received by the closing date of 16th June 2024			
Places are limited so early enrolment is advised; any questions, please do get in touch.			
<u>www.wonderfulwinds.com</u> Mel Orriss (Wonderful Winds): mail@wonderfulwinds com 07817 703844			

Mel Orriss (Wonderful Winds): mail@wonderfulwinds.com 07817 703844 Fiona Hunt (TuttiFlutti) fi.hunt@btinternet.com 07817 629691

Wonderful Winds



Under 18's Medical/Contact Form - Bristol, 30th June 2024

CHILD DETAILS			
Child's name:	Date of Birth:	Age:	
Name of GP:	Tel. No. of GP:		
Does your child have any medical conditions/allerg	ries/special educational needs that we sh	nould know about?	
Does your child need disabled access?			
PARENT/CARER CONTACT DETAILS			
Parent/Carer name:			
Parent/Carer email: (Please print clearly):			
Parent/Carer Home Tel. No:	Parent/Carer Mobile No:		
Emergency contact in case you're not available: Name:	Tel. No:		
Photographs: parental consent			
To comply with the Data Protection Act 1988 we need parental permission for Wonderful Winds to use photos/video recordings of Under 18's in publications or on its website/social media.			
Please tick this box if you wish to withhold permiss	sion		
<u>DECLARATION</u>			
I have read and agree to the Terms and Conditions. (See website)			
Name (please print)			
Signed	Date		
www.wonderfulwinds.com			

Mel Orriss (Wonderful Winds): mail@wonderfulwinds.com 07817 703844 Fiona Hunt (TuttiFlutti) fi.hunt@btinternet.com 07817 629691