## Chester Young Musician of the Year Competition Application form

ivarrie
Address
Postcode
E-mail
Telephone
Date of birth(dd/mm/yyyy)
Instrument
Class being entered
Current grade attained
My preferred start time would be: Morning / Afternoon
School attended
Applicant's Teacher:
Name
Address
Postcode
Telephone
l enclose my application fee of £10 (cheques to be made payable to Chester Music Society)
I agree to be bound by the terms and conditions of the Competition as set out herein
Signed
Date