



Music Group Membership Form

SEASON 2010 - 2011

PERSONAL DETAILS - ADULT MEMBERSHIP

Please use block capitals

New Member

Renewal

Additional Group

Details Changed

Surname

Forename
(underline name used)

Address

Postcode

Telephone No
(incl. STD code)

Ex-directory Yes/No

Mobile No

Note: Ex-directory numbers will not be passed on to anyone else and will only be used by Gloucestershire Music

Instrument(s)

Grade(s)

Email

To comply with the Data Protection Act 1988 if the member is under 18 we will need parental permission to use any photos or video recordings produced by Gloucestershire Music for promotional purposes only. Members' names will not be used. **Please tick the box if you wish to withhold permission**

TICK ALL THE GROUPS YOU ARE JOINING

Subscription - per group (36 sessions)

- | | | | | | | |
|---|-----------------------------|--|------|-----------------------------|---|-----|
| <input type="checkbox"/> Colwell Arts Concert Band | Joining during Autumn Term: | <input type="checkbox"/> Sept/Oct 2010 | £138 | Joining during Summer Term: | <input type="checkbox"/> Apr/May 2011 | £46 |
| <input type="checkbox"/> Colwell Arts Jazz Ensemble | | <input type="checkbox"/> Nov/Dec 2010 | £115 | | <input type="checkbox"/> June/July 2011 | £23 |
| <input type="checkbox"/> Lakeside Concert Band | Joining during Spring Term: | <input type="checkbox"/> Jan/Feb 2011 | £92 | | | |
| | | <input type="checkbox"/> March 2011 | £69 | | | |

Subscription - per group (30 sessions)

- | | | | | | | |
|---|-----------------------------|--|------|-----------------------------|---|-----|
| <input type="checkbox"/> Colwell Arts Jazz2go | Joining during Autumn Term: | <input type="checkbox"/> Sept/Oct 2010 | £114 | Joining during Summer Term: | <input type="checkbox"/> Apr/May 2011 | £38 |
| <input type="checkbox"/> Colwell Arts Orchestra | | <input type="checkbox"/> Nov/Dec 2010 | £95 | | <input type="checkbox"/> June/July 2011 | £19 |
| <input type="checkbox"/> Five Valleys Adult Windband 1 | Joining during Spring Term: | <input type="checkbox"/> Jan/Feb 2011 | £76 | | | |
| <input type="checkbox"/> Five Valleys Adult Windband 2 | | <input type="checkbox"/> March 2011 | £57 | | | |
| <input type="checkbox"/> Five Valleys Learn As You Play Strings | | | | | | |
| <input type="checkbox"/> Learn As You Play Strings | | | | | | |

PAYMENT:



* I enclose a cheque / please charge my card below for £
.*Please delete as appropriate (Cheques payable to Glos County Council)

Cardholder
Name

(please print)

Start Date

Expiry Date

Issue No.
(Switch only)

Card No

SIGNATURE:

DAYTIME TEL NO.

N.B. If you wish to pay by monthly instalments please complete the enclosed Standing Order Mandate. Mandates must be received by 1st of the month. The amount collected from your account will then be divided into equal payments with the final one being collected in August 2011. This option is only available for applications up to and including March 2011. Thereafter payment should be made in full.

OR JOIN / RENEW ONLINE: www.gloucestershiremusic.co.uk

Please return your completed form and payment to: CMG, Gloucestershire Music, Colwell Arts Centre, Derby Road, Gloucester. GL1 4AD.
Tel: 01452 330300 Fax: 01452 541303 Email: admin@gloucestershiremusic.co.uk Website: www.gloucestershiremusic.co.uk

STANDING ORDER MANDATE

Please pay	Bank	Branch Title (not address)	Sort Code
	HSBC	GLOUCESTER, THE CROSS	40 - 22 - 09

For the credit of	Beneficiary's Name		Account Number						
	GLOUCESTERSHIRE COUNTY COUNCIL		1	1	6	0	0	0	0

FOR OFFICE USE ONLY	The total sum of	Amount in Figures	Amount in Words			
		£				
	Commencing	Date and Amount of First Payment		and thereafter every	Due Date and Frequency	
		/ /	£	every	14th of each month	
	Instalments of	£	Until		Date and Amount of Last Payment	
	Quoting Reference	206863/82520			/ /	£

and debit my/our account accordingly

This instruction cancels any previous order in favour of the beneficiary named above, under this reference

CUSTOMER DETAILS

Account Holder(s) Name(s) <i>please print</i>	Sort Code	Account Number

Signature(s) _____ Date _____

This Standing Order is in relation to membership fees for:
<i>Please print</i>

Bank Name: _____

Address: _____

Post Code: _____

Note: The Bank will not undertake to

- (1) make any reference to Value Added Tax or other intermediate element.
- (2) advise payer's address to beneficiary.
- (3) advise beneficiary of inability to pay.
- (4) request beneficiary's banker to advise Beneficiary of receipt of payment.

This form should be returned with your completed Music Group Membership Form to:
CMG, Gloucestershire Music, Colwell Arts Centre, Derby Road, Gloucester. GL1 4AD.