



I wish to attend _____ (Course Name)

On _____ (Course Dates)

Personal Details

(Mr/Ms/Miss/Mrs) Surname		Forenames/Given Names			
Nationality		Date and place of birth		Age	
Contact address		Permanent address (if different)			
Daytime telephone		Email address			

In Case of Emergency:

Contact Name:	Relationship to you:	Telephone:
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More About You

Please state your instrument/Voice (if applicable)

Please state your level of ability (eg ABRSM grade/experience)

Place of Study/Place of Work?

How did you hear about the course?

Method of Payment

I have enclosed payment of £.....(Insert course fee)

Payment Method Cheque Debit/Credit Card

Debit/Credit Card Details

Card No

Visa Delta Maestro Mastercard

Expiry Date / Valid From /

Issue No 3 Digit security code (on signature strip)

Signed: _____ Date: _____

Is the address above the cardholders address: Yes No (please give details below)

Cardholders address:
 (please include your house number and postcode)

If you require accommodation during your course, please contact the Events Team on 029 2039 1391 or email summerschools@rwcmd.ac.uk

Please return your registration form ASAP to:
 Events Team, Royal Welsh College of Music & Drama, Castle Grounds, Cathays Park, Cardiff CF10 3ER, UK