

SCHOOL REGISTRATION FORM

Name of School:
Full Address:
Local Authority:
Type of School (*delete as appropriate*): State / Independent
Level of School (*delete as appropriate*): Primary / Secondary / 6th Form College

Name of Head Teacher:
Email address:
Telephone number:

Name of Music Co-ordinator:
Email address:
Telephone number:

Name of School Administrator:
Email address:
Telephone number:

No. of children in school:
No. attending concert (*Please note this should not exceed 120*):
Curriculum Years of concert attendees (Key Stage 2 only):

Parking (*delete as appropriate*): None / In school / Free on street / Pay on street
Nearest Tube/Bus/other:
Piano (*delete as appropriate*): None / Clavinova / Upright / Grand

May we film for a DVD? (*delete as appropriate*): Yes / No
May we take photographs? (*delete as appropriate*): Yes / No
May we use any footage / photos in our future publicity?: Yes / No

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Please fill in your visit preferences here:

- **TERM:**
- **MONTH:**
- Preferred days of the week:
- Preferred time of day:
- **THREE** specific dates that work for your school (Please make sure the Headteacher can attend, see 'Info for Teachers' document for more information):

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*Please note that **the concert lasts one hour** and that all children should be seated before the start time.*

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For CAVATINA Office use only

Date & Time:
Ensemble:
Date when Feedback was received:
Previous ensembles at this school:
Other comments:

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Please email this form to rhancox@me.com or post to: CAVATINA School Concerts Coordinator, Rhian Hancox, 152 Malyons Rd, London, SE13 7XG. Tel: 07974 102014