IBACUS INTERNATIONAL HARP COURSE

Summer Course 2017: 14-19 August

PLEASE USE CAPITAL LETTERS

Name of Applicant:	
Date of birth: 2017):	(Age on 14th August
Name of Parent/Carer:	
Full address with postcode:	
Home tel:	Mobile tel:
Email:	
Email of parent if under 18:	
Harp teacher:	
Length of harp study:	
Harp exams passed:	
Dietary requirements/Allerg	ies:
How did you hear about the Internet / Teacher / Flyer / F	e course? Previous Participant / Other (please specify)
Please find payment enclos Deposit £150.00 (non-refun	
I do/ do not need to hire a h Priority is given to overseas UK residents please contac instruments	•
I enclose £95.00 for harp hi	re (non-refundable), please pay at time of deposit
	yable to Charlotte Seale, and post to 33 N16 OSH; applicants who wish to pay by electronic Oibacusharpcourse.com
Signed:	Date: