## Saturday Music Centre Williamwood High School

## P2 Singing Games and Rhymes 2017/18

## PLACES WILL BE ISSUED ON A FIRST COME FIRST SERVED BASIS

I wish my child to be considered for a place on the Singing Games and Rhymes Programme at the Saturday Music Centre

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| --- | --- | --- | --- | --- |
| APPLICATION FORM **(PLEASE USE BLOCK LETTERS)** | | | | |
| **Name of Pupil:** |  | **Telephone No.** | **Mobile No.** | |
|  |  |  |  | |
| **Address:** |  | **Email Address:** | | |
|  |  |  | | |
|  |  |  | | |
|  |  | **School:** | | |
|  |  |  | | |
| **Post Code:** |  |  | | |
|  |  |  | | |
| **For Office use only**  **Time Allocated:** |  | **Teacher:** | | **Room No.** |
|  | |  |

Signature of parent/carer Date

**Please return, along with consent form to:** Linda Fenn, Co-ordinator - Music Centre & Instrumental Music Service c/o Saturday Music Centre, Williamwood High School, Eaglesham Road, Clarkston, East Renfrewshire. G76 8RF, **no later than Monday 19 June 2017.**